

**Fill in this information to identify your case:**

United States Bankruptcy Court for the:

SOUTHERN DISTRICT OF NEW YORK

Case number (if known)

Chapter **11**

☐ Check if this an amended filing

**Official Form 201**

**Voluntary Petition for Non-Individuals Filing for Bankruptcy**

4/16

If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write the debtor's name and case number (if known). For more information, a separate document, *Instructions for Bankruptcy Forms for Non-Individuals*, is available.

1. Debtor's name **Bay Ridge Automotive Company, LLC**

2. All other names debtor used in the last 8 years

Include any assumed names, trade names and *doing business as* names

**DBA Bay Ridge Ford**

3. Debtor's federal Employer Identification Number (EIN) **27-1500694**

4. Debtor's address

Principal place of business

Mailing address, if different from principal place of business

**612 86th Street  
Brooklyn, NY 11228**

Number, Street, City, State & ZIP Code

P.O. Box, Number, Street, City, State & ZIP Code

**Kings**  
County

Location of principal assets, if different from principal place of business

Number, Street, City, State & ZIP Code

5. Debtor's website (URL) **www.bayridgeford.com**

6. Type of debtor

☒ Corporation (including Limited Liability Company (LLC) and Limited Liability Partnership (LLP))

☐ Partnership (excluding LLP)

☐ Other. Specify: \_\_\_\_\_

Debtor **Bay Ridge Automotive Company, LLC**  
Name

Case number (if known)

7. Describe debtor's business A. Check one:

- ☐ Health Care Business (as defined in 11 U.S.C. § 101(27A))  
☐ Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B))  
☐ Railroad (as defined in 11 U.S.C. § 101(44))  
☐ Stockbroker (as defined in 11 U.S.C. § 101(53A))  
☐ Commodity Broker (as defined in 11 U.S.C. § 101(6))  
☐ Clearing Bank (as defined in 11 U.S.C. § 781(3))  
☒ None of the above

B. Check all that apply

- ☐ Tax-exempt entity (as described in 26 U.S.C. § 501)  
☐ Investment company, including hedge fund or pooled investment vehicle (as defined in 15 U.S.C. § 80a-3)  
☐ Investment advisor (as defined in 15 U.S.C. § 80b-2(a)(11))

C. NAICS (North American Industry Classification System) 4-digit code that best describes debtor.  
See <http://www.uscourts.gov/four-digit-national-association-naics-codes>.

8. Under which chapter of the Bankruptcy Code is the debtor filing?

Check one:

- ☐ Chapter 7  
☐ Chapter 9

☒ Chapter 11. Check all that apply:

- ☐ Debtor's aggregate noncontingent liquidated debts (excluding debts owed to insiders or affiliates) are less than \$2,566,050 (amount subject to adjustment on 4/01/19 and every 3 years after that).  
☐ The debtor is a small business debtor as defined in 11 U.S.C. § 101(51D). If the debtor is a small business debtor, attach the most recent balance sheet, statement of operations, cash-flow statement, and federal income tax return or if all of these documents do not exist, follow the procedure in 11 U.S.C. § 1116(1)(B).  
☐ A plan is being filed with this petition.  
☐ Acceptances of the plan were solicited prepetition from one or more classes of creditors, in accordance with 11 U.S.C. § 1126(b).  
☐ The debtor is required to file periodic reports (for example, 10K and 10Q) with the Securities and Exchange Commission according to § 13 or 15(d) of the Securities Exchange Act of 1934. File the attachment to Voluntary Petition for Non-Individuals Filing for Bankruptcy under Chapter 11 (Official Form 201A) with this form.  
☐ The debtor is a shell company as defined in the Securities Exchange Act of 1934 Rule 12b-2.

☐ Chapter 12

9. Were prior bankruptcy cases filed by or against the debtor within the last 8 years?

- ☒ No.  
☐ Yes.

If more than 2 cases, attach a separate list.

District	When	Case number
District	When	Case number

10. Are any bankruptcy cases pending or being filed by a business partner or an affiliate of the debtor?

- ☐ No  
☒ Yes.

List all cases. If more than 1, attach a separate list

Debtor	See Rider	Relationship	Affiliate
District	Southern District of New York	When	Case number, if known

Debtor **Bay Ridge Automotive Company, LLC**  
Name

Case number (if known)

**11. Why is the case filed in this district?**

Check all that apply:

- ☒ Debtor has had its domicile, principal place of business, or principal assets in this district for 180 days immediately preceding the date of this petition or for a longer part of such 180 days than in any other district.
- ☐ A bankruptcy case concerning debtor's affiliate, general partner, or partnership is pending in this district.

**12. Does the debtor own or have possession of any real property or personal property that needs immediate attention?**

☒ No

☐ Yes.

Answer below for each property that needs immediate attention. Attach additional sheets if needed.

**Why does the property need immediate attention?** (Check all that apply.)

☐ It poses or is alleged to pose a threat of imminent and identifiable hazard to public health or safety.

What is the hazard?

☐ It needs to be physically secured or protected from the weather.

☐ It includes perishable goods or assets that could quickly deteriorate or lose value without attention (for example, livestock, seasonal goods, meat, dairy, produce, or securities-related assets or other options).

☐ Other

**Where is the property?**

Number, Street, City, State & ZIP Code

**Is the property insured?**

☐ No

☐ Yes. Insurance agency

Contact name

Phone

**Statistical and administrative information**

**13. Debtor's estimation of available funds**

Check one:

- ☒ Funds will be available for distribution to unsecured creditors.
- ☐ After any administrative expenses are paid, no funds will be available to unsecured creditors.

**14. Estimated number of creditors**

☐ 1-49

☐ 50-99

☒ 100-199

☐ 200-999

☐ 1,000-5,000

☐ 5001-10,000

☐ 10,001-25,000

☐ 25,001-50,000

☐ 50,001-100,000

☐ More than 100,000

**15. Estimated Assets**

☐ \$0 - \$50,000

☐ \$50,001 - \$100,000

☐ \$100,001 - \$500,000

☐ \$500,001 - \$1 million

☐ \$1,000,001 - \$10 million

☒ \$10,000,001 - \$50 million

☐ \$50,000,001 - \$100 million

☐ \$100,000,001 - \$500 million

☐ \$500,000,001 - \$1 billion

☐ \$1,000,000,001 - \$10 billion

☐ \$10,000,000,001 - \$50 billion

☐ More than \$50 billion

**16. Estimated liabilities**

☐ \$0 - \$50,000

☐ \$50,001 - \$100,000

☐ \$100,001 - \$500,000

☐ \$500,001 - \$1 million

☒ \$1,000,001 - \$10 million

☐ \$10,000,001 - \$50 million

☐ \$50,000,001 - \$100 million

☐ \$100,000,001 - \$500 million

☐ \$500,000,001 - \$1 billion

☐ \$1,000,000,001 - \$10 billion

☐ \$10,000,000,001 - \$50 billion

☐ More than \$50 billion

Debtor **Bay Ridge Automotive Company, LLC**  
Name

Case number (if known)

**Request for Relief, Declaration, and Signatures**

**WARNING** -- Bankruptcy fraud is a serious crime. Making a false statement in connection with a bankruptcy case can result in fines up to \$500,000 or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

**17. Declaration and signature  
of authorized  
representative of debtor**

The debtor requests relief in accordance with the chapter of title 11, United States Code, specified in this petition.

I have been authorized to file this petition on behalf of the debtor.

I have examined the information in this petition and have a reasonable belief that the information is true and correct.

I declare under penalty of perjury that the foregoing is true and correct.

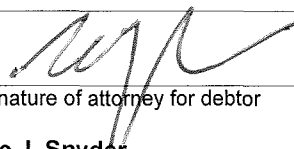
Executed on 07/10/2017  
MM / DD / YYYY

X   
Signature of authorized representative of debtor

Gary B. Flom  
Printed name

Title Manager

**18. Signature of attorney**

X   
Signature of attorney for debtor

Date 07/10/2017  
MM / DD / YYYY

Eric J. Snyder  
Printed name

Wilk Auslander LLP  
Firm name

1515 Broadway, 43rd Floor  
New York, NY 10036  
Number, Street, City, State & ZIP Code

Contact phone 212-981-2328

Email address esnyder@wilkauslander.com

2161164  
Bar number and State

Fill in this information to identify your case:	
United States Bankruptcy Court for the:	
SOUTHERN DISTRICT OF NEW YORK	
Case number (if known)	Chapter <u>11</u>

☐ Check if this an amended filing

### Rider 1

#### **Pending Bankruptcy Cases Filed by the Debtor and Affiliates of the Debtor**

On the date hereof, each of the entities listed below (collectively, the “Debtors”) filed a petition in the United States Bankruptcy Court for the Southern District of New York for relief under chapter 11 of title 11 of the United States Code. The Debtors have moved for joint administration of these cases under the case number assigned to the chapter 11 of BICOM NY, LLC.

- BICOM NY, LLC
- ISCOM NY, LLC
- Bay Ridge Automotive Company, LLC

**UNANIMOUS WRITTEN CONSENT  
OF  
THE MEMBERS OF BAY RIDGE AUTOMOTIVE COMPANY, LLC  
As of June \_\_, 2017**

The undersigned being all of the members (collectively, the "Members") of BAY RIDGE AUTOMOTIVE COMPANY, LLC (the "Company") do hereby consent to, adopt and approve the following resolutions by unanimous written consent in lieu of a meeting:

**BANKRUPTCY PETITION**

**WHEREAS**, the Members of the Company deem it advisable and in the best interests of the Company to file voluntary petitions in the United States Bankruptcy Court (the "Petition") pursuant to Chapter 11 of Title 11 of the United States Code, including, but not limited to, any and all exhibits, schedules and annexes related to the Petition and all agreements, undertakings, certificates, instruments and other documents contemplated thereby and executed and delivered in connection therewith (collectively with the Petition, the "Petition Documents").

**AUTHORIZATION**

**NOW, THEREFORE, BE IT RESOLVED** that the Petition and the Petition Documents are hereby approved;

**RESOLVED**, that the form, terms and provisions of the Petition Documents being delivered in connection with the Petition, and the performance by the Company of all of its obligations under the Petition Documents, be, and they hereby are, adopted, approved, ratified and confirmed in all respects;

**RESOLVED**, that Gary Flom, as Manager of the Company (the "Manager"), is, authorized, empowered and directed, in the name of and on behalf of the Company and under its corporate seal or otherwise, to execute and deliver all documents necessary to perfect the Petition on behalf of the Company, with such additions thereto or deletions therefrom as the Manager shall, in his or their sole discretion, determine to be necessary, proper or advisable, such determination, and the Member's approval thereof, to be evidenced conclusively by the execution and delivery thereof;

**RESOLVED**, that the Manager is authorized and directed to appear in all bankruptcy proceedings on behalf of the Company and to otherwise do and perform all acts and deeds and to execute and deliver all necessary documents on behalf of the Company in connection with such bankruptcy cases;

**RESOLVED**, that the Manager on behalf of the Company is authorized and directed to employ the law firm of Wilk Auslander LLP to represent the Company in such bankruptcy cases;

**RESOLVED**, that any and all actions taken by the Manager on behalf of the Company, in connection with and in furtherance of the matters referred to in the foregoing resolutions, is hereby ratified, confirmed, adopted and approved in all respects;



**RESOLVED**, that the Manager be and hereby is, authorized, empowered and directed to take all such further action, and to execute, deliver, certify and file all such further agreements, undertakings, certificates, instruments and other documents, in the name and on behalf of the Company, and under its corporate seal or otherwise, and to pay such costs and expense as such Manager in his sole discretion, determines to be necessary, proper or advisable to carry out the intent and accomplish the purposes of the foregoing resolutions and the transactions contemplated thereby; the taking of such actions and the execution and delivery, certification and filing of such agreements, undertakings, certificates, instruments and other documents to be conclusive evidence of the Members ratification, confirmation, adoption and approval thereof; and

**RESOLVED**, that the Company shall not make any distributions to any of the Members unless such distributions are authorized by the unanimous written consent of all of the Members of the Company or pursuant to an order of the United States Bankruptcy Court.

This Consent may be executed and delivered in counterparts (including by electronic transmission), each of which shall be an original instrument, but all of which together shall constitute one Consent.

*[Signature Page Follows]*

IN WITNESS WHEREOF, the undersigned, being all of the members of the Company,  
have executed this Unanimous Written Consent as of the date hereof.

Alex Boyko

Ven Nilva

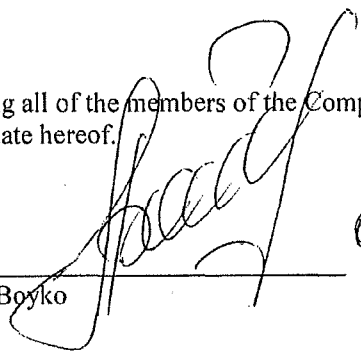
Gary Flom

[Signature Page to Unanimous Written Consent of the Members... BAY RIDGE AUTOMOTIVE COMPANY, LLC]

00979871.1



**IN WITNESS WHEREOF**, the undersigned, being all of the members of the Company,  
have executed this Unanimous Written Consent as of the date hereof.

  
\_\_\_\_\_  
Alex Boyko

06.22.17

\_\_\_\_\_  
Ven Nilva

\_\_\_\_\_  
Gary Flom

**UNITED STATES BANKRUPTCY COURT  
SOUTHERN DISTRICT OF NEW YORK**

-----X  
In re: :  
: Chapter 11  
BAY RIDGE AUTOMOTIVE COMPANY, LLC, :  
: Debtor. : Case No. 17- [ ] ( )  
: :  
-----X

**LIST OF EQUITY HOLDERS**

<b>MEMBER</b>	<b>PERCENTAGE INTEREST</b>
Gary Flom	40%
Ven Nilva	30%
Alex Boyko	30%

Dated: New York, New York  
7/10, 2017

**BAY RIDGE AUTOMOTIVE COMPANY, LLC**

By: 

Gary B. Flom  
Manager

**UNITED STATES BANKRUPTCY COURT  
SOUTHERN DISTRICT OF NEW YORK**

----- X  
In re: :  
 : Chapter 11  
BAY RIDGE AUTOMOTIVE COMPANY, LLC, :  
 :  
Debtor. : Case No. 17- [ ] ( )  
 :  
----- X

**CORPORATE OWNERSHIP STATEMENT**

The above-captioned debtor (the "Debtor") certifies pursuant to Rules 1007(a)(1) and 7007.1 of the Federal Rules of Bankruptcy Procedure, that there are no corporations, other than a government unit, that directly or indirectly own 10% or more of any class of the Debtor's equity interest.

The Debtor further certifies pursuant to Rule 1007-3 of the Local Rules for the U.S. Bankruptcy Court for the Southern District of New York that there are no corporations whose securities are publicly traded in which the Debtor directly or indirectly owns 10% or more of any class of the corporation's equity interests, and any general or limited partnership or joint venture in which the Debtor owns an interest.

Dated: New York, New York  
7/10, 2017

**BAY RIDGE AUTOMOTIVE COMPANY, LLC**

By: \_\_\_\_\_

Gary B. Flom  
Manager

**Fill in this information to identify the case:**

Debtor name Bay Ridge Automotive Company, LLC

United States Bankruptcy Court for the: SOUTHERN DISTRICT OF NEW YORK

Case number (if known) \_\_\_\_\_

☐ Check if this is an amended filing

**Official Form 202**

**Declaration Under Penalty of Perjury for Non-Individual Debtors**

12/15

An individual who is authorized to act on behalf of a non-individual debtor, such as a corporation or partnership, must sign and submit this form for the schedules of assets and liabilities, any other document that requires a declaration that is not included in the document, and any amendments of those documents. This form must state the individual's position or relationship to the debtor, the identity of the document, and the date. Bankruptcy Rules 1008 and 9011.

**WARNING -- Bankruptcy fraud is a serious crime. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$500,000 or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.**

**Declaration and signature**

I am the president, another officer, or an authorized agent of the corporation; a member or an authorized agent of the partnership; or another individual serving as a representative of the debtor in this case.

I have examined the information in the documents checked below and I have a reasonable belief that the information is true and correct:

- ☒ *Schedule A/B: Assets—Real and Personal Property* (Official Form 206A/B)
- ☒ *Schedule D: Creditors Who Have Claims Secured by Property* (Official Form 206D)
- ☒ *Schedule E/F: Creditors Who Have Unsecured Claims* (Official Form 206E/F)
- ☒ *Schedule G: Executory Contracts and Unexpired Leases* (Official Form 206G)
- ☒ *Schedule H: Codebtors* (Official Form 206H)
- ☒ *Summary of Assets and Liabilities for Non-Individuals* (Official Form 206Sum)
- ☐ *Amended Schedule*
- ☒ *Chapter 11 or Chapter 9 Cases: List of Creditors Who Have the 20 Largest Unsecured Claims and Are Not Insiders* (Official Form 204)
- ☐ Other document that requires a declaration \_\_\_\_\_

I declare under penalty of perjury that the foregoing is true and correct.

Executed on

7/10/17

X

Signature of individual signing on behalf of debtor

Gary B. Flom

Printed name

Manager

Position or relationship to debtor

**Fill in this information to identify the case:**

Debtor name **Bay Ridge Automotive Company, LLC**  
United States Bankruptcy Court for the: **SOUTHERN DISTRICT OF NEW YORK**  
Case number (if known): \_\_\_\_\_

☐ Check if this is an  
amended filing

**Official Form 204**

**Chapter 11 or Chapter 9 Cases: List of Creditors Who Have the 20 Largest Unsecured Claims and Are Not Insiders**

12/15

A list of creditors holding the 20 largest unsecured claims must be filed in a Chapter 11 or Chapter 9 case. Include claims which the debtor disputes. Do not include claims by any person or entity who is an insider, as defined in 11 U.S.C. § 101(31). Also, do not include claims by secured creditors, unless the unsecured claim resulting from inadequate collateral value places the creditor among the holders of the 20 largest unsecured claims.

Name of creditor and complete mailing address, including zip code	Name, telephone number and email address of creditor contact	Nature of claim (for example, trade debts, bank loans, professional services, and government contracts)	Indicate if claim is contingent, unliquidated, or disputed	Amount of claim If the claim is fully unsecured, fill in only unsecured claim amount. If claim is partially secured, fill in total claim amount and deduction for value of collateral or setoff to calculate unsecured claim.		
				Total claim, if partially secured	Deduction for value of collateral or setoff	Unsecured claim
AER Sales LP 1605 Surveyor Blvd. Carrollton, TX 75006			Disputed			\$75,950.88
Auto Alert 9050 Irvine Center Drive Irvine, CA 92618			Disputed			\$21,387.45
Autoloop PO Box 1266 Clearwater, FL 33757-1266			Disputed			\$35,500.19
Cars.com, LLC 2631 Solution Center Chicago, IL 60677-0001			Disputed			\$17,470.19
Danken Auto Parts 84 18th Street Brooklyn, NY 11232			Disputed			\$15,785.60
Dige Associates LLC 2707 Landing Avenue Bellmore, NY 11710			Disputed			\$125,156.40
Edmunds.com, Inc. PO Box 783531 Philadelphia, PA 19178-3531			Disputed			\$23,787.34
Ford Motor Company 16800 Executive Plaza Dearborn, MI 48126			Disputed			\$42,708.30

Debtor **Bay Ridge Automotive Company, LLC**  
Name

Case number (if known)

Name of creditor and complete mailing address, including zip code	Name, telephone number and email address of creditor contact	Nature of claim (for example, trade debts, bank loans, professional services,	Indicate if claim is contingent, unliquidated, or disputed	Amount of claim If the claim is fully unsecured, fill in only unsecured claim amount. If claim is partially secured, fill in total claim amount and deduction for value of collateral or setoff to calculate unsecured claim.		
				Total claim, if partially secured	Deduction for value of collateral or setoff	Unsecured claim
Independent Dealer Group, Inc. 851 International Pkwy Suite 100 Richardson, TX 75085			Disputed			\$19,385.00
Joseph S. Aboyoun, Esq. 77 Bloomfield Avenue Route 46 Pine Brook, NJ 07058						\$29,331.13
L & S Collision 41 Rector Street Staten Island, NY 10310-1223			Disputed			\$42,167.00
Michael Lilikakis 235 89th Street Brooklyn, NY 11209			Disputed			\$17,800.00
Motivated Security Services PO Box 215 Somerville, NJ 08876			Disputed			\$39,566.56
NYCEDC PO Box 5264 New York, NY 10008-5264			Disputed			\$57,905.48
NYS Dept. of Taxation Bankruptcy Division PO Box 5300 Albany, NY 12205-0300			Disputed			\$760,904.00
One Service Source Inc. PO Box 40 Carle Place, NY 11514			Disputed			\$22,569.78
Paul Revere Life Ins. Co. PO Box 1365 Columbia, SC 29202-1365			Disputed			\$27,499.72
Pitta Bishop Del Giorno & Gibl 120 Broadway 28th Floor New York, NY 10271			Disputed			\$74,187.05

Debtor **Bay Ridge Automotive Company, LLC**  
Name

Case number (if known)

Name of creditor and complete mailing address, including zip code	Name, telephone number and email address of creditor contact	Nature of claim (for example, trade debts, bank loans, professional services,	Indicate if claim is contingent, unliquidated, or disputed	Amount of claim If the claim is fully unsecured, fill in only unsecured claim amount. If claim is partially secured, fill in total claim amount and deduction for value of collateral or setoff to calculate unsecured claim.		
				Total claim, if partially secured	Deduction for value of collateral or setoff	Unsecured claim
TD Bank 32 Chestnut Street Lewiston, ME 04240			Disputed			\$42,084.68
UAW Local 259 140 Sylvan Avenue Suite 303 Englewood Cliffs, NJ 07632			Disputed			\$50,652.92

Fill in this information to identify the case:

Debtor name Bay Ridge Automotive Company, LLC

United States Bankruptcy Court for the: SOUTHERN DISTRICT OF NEW YORK

Case number (if known) \_\_\_\_\_

☐ Check if this is an amended filing

Official Form 206Sum

Summary of Assets and Liabilities for Non-Individuals

12/15

Part 1: Summary of Assets

1. *Schedule A/B: Assets-Real and Personal Property* (Official Form 206A/B)

1a. Real property: Copy line 88 from <i>Schedule A/B</i> .....	\$ 0.00
1b. Total personal property: Copy line 91A from <i>Schedule A/B</i> .....	\$ 14,851,262.00
1c. Total of all property: Copy line 92 from <i>Schedule A/B</i> .....	\$ 14,851,262.00

Part 2: Summary of Liabilities

2. <i>Schedule D: Creditors Who Have Claims Secured by Property</i> (Official Form 206D) Copy the total dollar amount listed in Column A, <i>Amount of claim</i> , from line 3 of <i>Schedule D</i> .....	\$ 7,753,437.00
3. <i>Schedule E/F: Creditors Who Have Unsecured Claims</i> (Official Form 206E/F)	
3a. Total claim amounts of priority unsecured claims: Copy the total claims from Part 1 from line 5a of <i>Schedule E/F</i> .....	\$ 1,003,503.00
3b. Total amount of claims of nonpriority amount of unsecured claims: Copy the total of the amount of claims from Part 2 from line 5b of <i>Schedule E/F</i> .....	+\$ 1,047,674.98
4. Total liabilities ..... Lines 2 + 3a + 3b	\$ 9,804,614.98



Fill in this information to identify the case:

Debtor name Bay Ridge Automotive Company, LLC

United States Bankruptcy Court for the: SOUTHERN DISTRICT OF NEW YORK

Case number (if known) \_\_\_\_\_

☐ Check if this is an amended filing

Official Form 206A/B

Schedule A/B: Assets - Real and Personal Property

12/15

Disclose all property, real and personal, which the debtor owns or in which the debtor has any other legal, equitable, or future interest. Include all property in which the debtor holds rights and powers exercisable for the debtor's own benefit. Also include assets and properties which have no book value, such as fully depreciated assets or assets that were not capitalized. In Schedule A/B, list any executory contracts or unexpired leases. Also list them on *Schedule G: Executory Contracts and Unexpired Leases* (Official Form 206G).

Be as complete and accurate as possible. If more space is needed, attach a separate sheet to this form. At the top of any pages added, write the debtor's name and case number (if known). Also identify the form and line number to which the additional information applies. If an additional sheet is attached, include the amounts from the attachment in the total for the pertinent part.

For Part 1 through Part 11, list each asset under the appropriate category or attach separate supporting schedules, such as a fixed asset schedule or depreciation schedule, that gives the details for each asset in a particular category. List each asset only once. In valuing the debtor's interest, do not deduct the value of secured claims. See the instructions to understand the terms used in this form.

Part 1: **Cash and cash equivalents**

1. Does the debtor have any cash or cash equivalents?

☒ No. Go to Part 2.

☐ Yes Fill in the information below.

All cash or cash equivalents owned or controlled by the debtor

Current value of debtor's interest

Part 2: **Deposits and Prepayments**

6. Does the debtor have any deposits or prepayments?

☐ No. Go to Part 3.

☒ Yes Fill in the information below.

7. **Deposits, including security deposits and utility deposits**  
Description, including name of holder of deposit

7.1. See Attachment No. 1

\$206,265.00

8. **Prepayments, including prepayments on executory contracts, leases, insurance, taxes, and rent**  
Description, including name of holder of prepayment

9. **Total of Part 2.**

Add lines 7 through 8. Copy the total to line 81.

\$206,265.00

Part 3: **Accounts receivable**

10. Does the debtor have any accounts receivable?

☐ No. Go to Part 4.

☒ Yes Fill in the information below.

11. **Accounts receivable**

11a. 90 days old or less: 677,560.00 - 0.00 = ....  
face amount doubtful or uncollectible accounts

\$677,560.00

Debtor Bay Ridge Automotive Company, LLC Case number (if known) \_\_\_\_\_  
Name

11b. Over 90 days old: 616,801.00 - 0.00 = .... \$616,801.00  
face amount doubtful or uncollectible accounts

12. Total of Part 3.

\$1,294,361.00

Current value on lines 11a + 11b = line 12. Copy the total to line 82.

**Part 4: Investments**

13. Does the debtor own any investments?

- ☒ No. Go to Part 5.  
☐ Yes Fill in the information below.

**Part 5: Inventory, excluding agriculture assets**

18. Does the debtor own any inventory (excluding agriculture assets)?

- ☐ No. Go to Part 6.  
☒ Yes Fill in the information below.

	General description	Date of the last physical inventory	Net book value of debtor's interest (Where available)	Valuation method used for current value	Current value of debtor's interest
19.	Raw materials				
20.	Work in progress ?	06/25/2017	\$24,868.00		\$24,868.00
	Parts		\$1,608,550.00		\$1,608,550.00

21. Finished goods, including goods held for resale

22. Other inventory or supplies

23. Total of Part 5.

\$1,633,418.00

Add lines 19 through 22. Copy the total to line 84.

24. Is any of the property listed in Part 5 perishable?

- ☒ No  
☐ Yes

25. Has any of the property listed in Part 5 been purchased within 20 days before the bankruptcy was filed?

☒ No

☐ Yes. Book value \_\_\_\_\_ Valuation method \_\_\_\_\_ Current Value \_\_\_\_\_

26. Has any of the property listed in Part 5 been appraised by a professional within the last year?

- ☒ No  
☐ Yes

**Part 6: Farming and fishing-related assets (other than titled motor vehicles and land)**

27. Does the debtor own or lease any farming and fishing-related assets (other than titled motor vehicles and land)?

- ☒ No. Go to Part 7.  
☐ Yes Fill in the information below.

**Part 7: Office furniture, fixtures, and equipment; and collectibles**

Debtor Bay Ridge Automotive Company, LLC Case number (if known) \_\_\_\_\_  
Name

38. Does the debtor own or lease any office furniture, fixtures, equipment, or collectibles?

- ☐ No. Go to Part 8.  
☒ Yes Fill in the information below.

	General description	Net book value of debtor's interest (Where available)	Valuation method used for current value	Current value of debtor's interest
39.	Office furniture Shop equipment	\$1,072,272.00		\$1,072,272.00
40.	Office fixtures			
41.	Office equipment, including all computer equipment and communication systems equipment and software			
42.	Collectibles <i>Examples:</i> Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; china and crystal; stamp, coin, or baseball card collections; other collections, memorabilia, or collectibles			
43.	Total of Part 7. Add lines 39 through 42. Copy the total to line 86.			\$1,072,272.00
44.	Is a depreciation schedule available for any of the property listed in Part 7? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes			
45.	Has any of the property listed in Part 7 been appraised by a professional within the last year? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes			

**Part 8:** Machinery, equipment, and vehicles

46. Does the debtor own or lease any machinery, equipment, or vehicles?

- ☐ No. Go to Part 9.  
☒ Yes Fill in the information below.

	General description Include year, make, model, and identification numbers (i.e., VIN, HIN, or N-number)	Net book value of debtor's interest (Where available)	Valuation method used for current value	Current value of debtor's interest
47.	Automobiles, vans, trucks, motorcycles, trailers, and titled farm vehicles			
47.1.	New Cars	\$2,215,506.00		\$2,215,506.00
47.2.	New Trucks	\$5,573,566.00		\$5,573,566.00
47.3.	Demo	\$965,915.00		\$965,915.00
47.4.	Other	\$1,264,020.00		\$1,264,020.00
48.	Watercraft, trailers, motors, and related accessories <i>Examples:</i> Boats, trailers, motors, floating homes, personal watercraft, and fishing vessels			
49.	Aircraft and accessories			

Debtor Bay Ridge Automotive Company, LLC Case number (if known) \_\_\_\_\_  
Name

50. Other machinery, fixtures, and equipment (excluding farm machinery and equipment)  
? \$625,939.00 \$625,939.00

51. Total of Part 8. \$10,644,946.00  
Add lines 47 through 50. Copy the total to line 87.

52. Is a depreciation schedule available for any of the property listed in Part 8?  
☒ No  
☐ Yes

53. Has any of the property listed in Part 8 been appraised by a professional within the last year?  
☒ No  
☐ Yes

**Part 9: Real property**

54. Does the debtor own or lease any real property?

- ☐ No. Go to Part 10.  
☒ Yes Fill in the information below.

55. Any building, other improved real estate, or land which the debtor owns or in which the debtor has an interest

Description and location of property Include street address or other description such as Assessor Parcel Number (APN), and type of property (for example, acreage, factory, warehouse, apartment or office building, if available).	Nature and extent of debtor's interest in property	Net book value of debtor's interest (Where available)	Valuation method used for current value	Current value of debtor's interest
55.1. 182 58th Street, Brooklyn, NY	Tenant/Improvements	\$4,275,484.00		Unknown
55.2. 612 86th Street, Brooklyn, NY	Tenant	\$0.00		Unknown
55.3. 636-640 86th Street, Brooklyn, NY	Tenant	\$0.00		Unknown

56. Total of Part 9. \$0.00  
Add the current value on lines 55.1 through 55.6 and entries from any additional sheets. Copy the total to line 88.

57. Is a depreciation schedule available for any of the property listed in Part 9?  
☒ No  
☐ Yes

58. Has any of the property listed in Part 9 been appraised by a professional within the last year?  
☒ No  
☐ Yes

**Part 10: Intangibles and intellectual property**

59. Does the debtor have any interests in intangibles or intellectual property?

Official Form 206A/B

Schedule A/B Assets - Real and Personal Property

page 4

Debtor Bay Ridge Automotive Company, LLC Case number (if known) \_\_\_\_\_  
Name

- ☐ No. Go to Part 11.  
☒ Yes Fill in the information below.

	General description	Net book value of debtor's interest (Where available)	Valuation method used for current value	Current value of debtor's interest
60.	Patents, copyrights, trademarks, and trade secrets			
61.	Internet domain names and websites ?	\$0.00		Unknown
62.	Licenses, franchises, and royalties ?	\$0.00		Unknown
63.	Customer lists, mailing lists, or other compilations ?	\$0.00		Unknown
64.	Other intangibles, or intellectual property			
65.	Goodwill			
66.	Total of Part 10. Add lines 60 through 65. Copy the total to line 89.			\$0.00
67.	Do your lists or records include personally identifiable information of customers (as defined in 11 U.S.C. §§ 101(41A) and 107? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes			
68.	Is there an amortization or other similar schedule available for any of the property listed in Part 10? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes			
69.	Has any of the property listed in Part 10 been appraised by a professional within the last year? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes			

**Part 11: All other assets**

70. Does the debtor own any other assets that have not yet been reported on this form?  
Include all interests in executory contracts and unexpired leases not previously reported on this form.
- ☒ No. Go to Part 12.  
☐ Yes Fill in the information below.

Debtor Bay Ridge Automotive Company, LLC  
Name

Case number (if known) \_\_\_\_\_

**Part 12: Summary**

In Part 12 copy all of the totals from the earlier parts of the form

Type of property	Current value of personal property	Current value of real property
80. Cash, cash equivalents, and financial assets. Copy line 5, Part 1	\$0.00	
81. Deposits and prepayments. Copy line 9, Part 2.	\$206,265.00	
82. Accounts receivable. Copy line 12, Part 3.	\$1,294,361.00	
83. Investments. Copy line 17, Part 4.	\$0.00	
84. Inventory. Copy line 23, Part 5.	\$1,633,418.00	
85. Farming and fishing-related assets. Copy line 33, Part 6.	\$0.00	
86. Office furniture, fixtures, and equipment; and collectibles. Copy line 43, Part 7.	\$1,072,272.00	
87. Machinery, equipment, and vehicles. Copy line 51, Part 8.	\$10,644,946.00	
88. Real property. Copy line 56, Part 9.....>		\$0.00
89. Intangibles and intellectual property. Copy line 66, Part 10.	\$0.00	
90. All other assets. Copy line 78, Part 11.	+ \$0.00	
91. Total. Add lines 80 through 90 for each column	\$14,851,262.00	+ 91b. \$0.00
92. Total of all property on Schedule A/B. Add lines 91a+91b=92		\$14,851,262.00

**Fill in this information to identify the case:**

Debtor name Bay Ridge Automotive Company, LLC

United States Bankruptcy Court for the: SOUTHERN DISTRICT OF NEW YORK

Case number (if known) \_\_\_\_\_

☐ Check if this is an amended filing

**Official Form 206D**

**Schedule D: Creditors Who Have Claims Secured by Property**

12/15

Be as complete and accurate as possible.

**1. Do any creditors have claims secured by debtor's property?**

☐ No. Check this box and submit page 1 of this form to the court with debtor's other schedules. Debtor has nothing else to report on this form.

☒ Yes. Fill in all of the information below.

**Part 1: List Creditors Who Have Secured Claims**

2. List in alphabetical order all creditors who have secured claims. If a creditor has more than one secured claim, list the creditor separately for each claim.

**2.1 JP Morgan Chase Bank, NA**

Creditor's Name

**10 South Dearborn St.  
Chicago, IL 60603**

Creditor's mailing address

Creditor's email address, if known

Date debt was incurred

Last 4 digits of account number

Do multiple creditors have an interest in the same property?

☒ No

☐ Yes. Specify each creditor, including this creditor and its relative priority.

Describe debtor's property that is subject to a lien

**Blanket lien**

Describe the lien

Is the creditor an insider or related party?

☒ No

☐ Yes

Is anyone else liable on this claim?

☐ No

☒ Yes. Fill out *Schedule H: Codebtors* (Official Form 206H)

As of the petition filing date, the claim is:

Check all that apply

☒ Contingent

☒ Unliquidated

☒ Disputed

Column A

Amount of claim

Do not deduct the value of collateral.

**\$5,293,651.00**

Column B

Value of collateral that supports this claim

**\$0.00**

**2.2 TD Bank**

Creditor's Name

**1100 Lake Street  
Ramsey, NJ 07446**

Creditor's mailing address

Creditor's email address, if known

Date debt was incurred

Last 4 digits of account number

Do multiple creditors have an interest in the same property?

Describe debtor's property that is subject to a lien

**Improvements to 152 58th Street, Brooklyn, NY**

Describe the lien

Is the creditor an insider or related party?

☒ No

☐ Yes

Is anyone else liable on this claim?

☐ No

☒ Yes. Fill out *Schedule H: Codebtors* (Official Form 206H)

As of the petition filing date, the claim is:

Check all that apply

**\$2,459,786.00**

**\$0.00**

Debtor **Bay Ridge Automotive Company, LLC**  
Name

Case number (if know)

☒ No

☐ Yes. Specify each creditor,  
including this creditor and its relative  
priority.

☐ Contingent

☐ Unliquidated

☐ Disputed

3. Total of the dollar amounts from Part 1, Column A, including the amounts from the Additional Page, if any.

**\$7,753,437.0**  
**0**

**Part 2: List Others to Be Notified for a Debt Already Listed in Part 1**

List in alphabetical order any others who must be notified for a debt already listed in Part 1. Examples of entities that may be listed are collection agencies, assignees of claims listed above, and attorneys for secured creditors.

If no others need to be notified for the debts listed in Part 1, do not fill out or submit this page. If additional pages are needed, copy this page.

Name and address

On which line in Part 1 did  
you enter the related creditor?

Last 4 digits of  
account number for  
this entity



**Fill in this information to identify the case:**

Debtor name **Bay Ridge Automotive Company, LLC**

United States Bankruptcy Court for the: **SOUTHERN DISTRICT OF NEW YORK**

Case number (if known) \_\_\_\_\_

☐ Check if this is an amended filing

**Official Form 206E/F**

**Schedule E/F: Creditors Who Have Unsecured Claims**

12/15

Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY unsecured claims and Part 2 for creditors with NONPRIORITY unsecured claims. List the other party to any executory contracts or unexpired leases that could result in a claim. Also list executory contracts on *Schedule A/B: Assets - Real and Personal Property* (Official Form 206A/B) and on *Schedule G: Executory Contracts and Unexpired Leases* (Official Form 206G). Number the entries in Parts 1 and 2 in the boxes on the left. If more space is needed for Part 1 or Part 2, fill out and attach the Additional Page of that Part included in this form.

**Part 1: List All Creditors with PRIORITY Unsecured Claims**

1. Do any creditors have priority unsecured claims? (See 11 U.S.C. § 507).

☐ No. Go to Part 2.

☒ Yes. Go to line 2.

2. List in alphabetical order all creditors who have unsecured claims that are entitled to priority in whole or in part. If the debtor has more than 3 creditors with priority unsecured claims, fill out and attach the Additional Page of Part 1.

		Total claim	Priority amount	
2.1	<p>Priority creditor's name and mailing address</p> <p><b>Adele Mineo</b>  <b>2036 80th Street</b>  <b>Apt. 2R</b>  <b>Brooklyn, NY 11214</b></p> <p>Date or dates debt was incurred _____</p> <p>Last 4 digits of account number _____</p> <p>Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4) _____</p>	<p>As of the petition filing date, the claim is:</p> <p><i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent</p> <p><input type="checkbox"/> Unliquidated</p> <p><input checked="" type="checkbox"/> Disputed</p> <p>Basis for the claim: _____</p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No</p> <p><input type="checkbox"/> Yes</p>	<b>\$1,800.00</b>	<b>\$1,800.00</b>
2.2	<p>Priority creditor's name and mailing address</p> <p><b>Aleksander Malakhov</b>  <b>2911 86th Street</b>  <b>Apt. 7D</b>  <b>Brooklyn, NY 11223</b></p> <p>Date or dates debt was incurred _____</p> <p>Last 4 digits of account number _____</p> <p>Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4) _____</p>	<p>As of the petition filing date, the claim is:</p> <p><i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent</p> <p><input type="checkbox"/> Unliquidated</p> <p><input checked="" type="checkbox"/> Disputed</p> <p>Basis for the claim: _____</p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No</p> <p><input type="checkbox"/> Yes</p>	<b>\$3,628.00</b>	<b>\$3,628.00</b>

Debtor	<b>Bay Ridge Automotive Company, LLC</b> Name	Case number (if known)
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2.3	Priority creditor's name and mailing address <b>Alex Avrutsky</b> <b>1378 Holiday Park Drive</b> <b>Wantagh, NY 11793</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	\$7,500.00	\$7,500.00
Date or dates debt was incurred		Basis for the claim:		
Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

2.4	Priority creditor's name and mailing address <b>Amanda Ryan</b> <b>614 Mayfair Dr. S</b> <b>Brooklyn, NY 11234</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	Unknown	\$0.00
Date or dates debt was incurred		Basis for the claim:		
Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

2.5	Priority creditor's name and mailing address <b>Angelo Castelli</b> <b>120 E. 34th Street</b> <b>New York, NY 10016</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	\$1,991.00	\$1,991.00
Date or dates debt was incurred		Basis for the claim:		
Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

2.6	Priority creditor's name and mailing address <b>Ann Monahan</b> <b>152 Merrill Avenue</b> <b>Staten Island, NY 10314</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	\$2,303.00	\$2,303.00
Date or dates debt was incurred		Basis for the claim:		
Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

Debtor **Bay Ridge Automotive Company, LLC**  
Name

Case number (if known)

2.7	Priority creditor's name and mailing address <b>Anna Schneider Alvarez</b> <b>7406 17th Avenue</b> <b>Apt. D1</b> <b>Brooklyn, NY 11204</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	<b>\$197.00</b>	<b>\$197.00</b>
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Date or dates debt was incurred

Basis for the claim:

Last 4 digits of account number

Is the claim subject to offset?

Specify Code subsection of PRIORITY  
unsecured claim: 11 U.S.C. § 507(a) (4)

☒ No  
☐ Yes

2.8	Priority creditor's name and mailing address <b>Anthony Chuisano</b> <b>41 Richard Lane</b> <b>Staten Island, NY 10314</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	<b>\$5,356.00</b>	<b>\$5,356.00</b>
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Date or dates debt was incurred

Basis for the claim:

Last 4 digits of account number

Is the claim subject to offset?

Specify Code subsection of PRIORITY  
unsecured claim: 11 U.S.C. § 507(a) (4)

☒ No  
☐ Yes

2.9	Priority creditor's name and mailing address <b>Anthony Feline</b> <b>426 Naughton Avenue</b> <b>Staten Island, NY 10305</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	<b>\$940.00</b>	<b>\$940.00</b>
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Date or dates debt was incurred

Basis for the claim:

Last 4 digits of account number

Is the claim subject to offset?

Specify Code subsection of PRIORITY  
unsecured claim: 11 U.S.C. § 507(a) (4)

☒ No  
☐ Yes

2.10	Priority creditor's name and mailing address <b>Anthony Icorvaia</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	<b>\$2,100.00</b>	<b>\$2,100.00</b>
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Date or dates debt was incurred

Basis for the claim:

Last 4 digits of account number

Is the claim subject to offset?

Specify Code subsection of PRIORITY  
unsecured claim: 11 U.S.C. § 507(a) (4)

☒ No  
☐ Yes

Debtor **Bay Ridge Automotive Company, LLC**

Case number (if known)

Name

2.11 Priority creditor's name and mailing address As of the petition filing date, the claim is: **\$1,858.00** **\$1,858.00**

**Anthony J. Chuisano**  
**41 Richard Lane**  
**Staten Island, NY 10314**

*Check all that apply.*

- ☐ Contingent  
☐ Unliquidated  
☒ Disputed

Date or dates debt was incurred

Basis for the claim:

Last 4 digits of account number

Is the claim subject to offset?

Specify Code subsection of PRIORITY  
unsecured claim: 11 U.S.C. § 507(a) (4)

- ☒ No  
☐ Yes

2.12 Priority creditor's name and mailing address As of the petition filing date, the claim is: **\$4,376.00** **\$4,376.00**

**Brian Bischoff**  
**2353 Morse Avenue**  
**Scotch Plains, NJ 07076**

*Check all that apply.*

- ☐ Contingent  
☐ Unliquidated  
☒ Disputed

Date or dates debt was incurred

Basis for the claim:

Last 4 digits of account number

Is the claim subject to offset?

Specify Code subsection of PRIORITY  
unsecured claim: 11 U.S.C. § 507(a) (4)

- ☒ No  
☐ Yes

2.13 Priority creditor's name and mailing address As of the petition filing date, the claim is: **\$2,469.00** **\$2,469.00**

**Carla Martinez**  
**467 40th Street**  
**Apt. 3R**  
**Brooklyn, NY 11232**

*Check all that apply.*

- ☐ Contingent  
☐ Unliquidated  
☒ Disputed

Date or dates debt was incurred

Basis for the claim:

Last 4 digits of account number

Is the claim subject to offset?

Specify Code subsection of PRIORITY  
unsecured claim: 11 U.S.C. § 507(a) (4)

- ☒ No  
☐ Yes

2.14 Priority creditor's name and mailing address As of the petition filing date, the claim is: **\$4,055.00** **\$4,055.00**

**Chi Wah Chan**  
**2021 E. 23rd Street**  
**Brooklyn, NY 11229**

*Check all that apply.*

- ☐ Contingent  
☐ Unliquidated  
☒ Disputed

Date or dates debt was incurred

Basis for the claim:

Last 4 digits of account number

Is the claim subject to offset?

Specify Code subsection of PRIORITY  
unsecured claim: 11 U.S.C. § 507(a) (4)

- ☒ No  
☐ Yes

Debtor	<b>Bay Ridge Automotive Company, LLC</b> <small>Name</small>	Case number (if known): _____
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2.15	Priority creditor's name and mailing address <b>Christian Rodriguez</b> <b>3162 Bayview Avenue</b> <b>Apt. 7B</b> <b>Brooklyn, NY 11224</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	<b>\$2,004.00</b>	<b>\$2,004.00</b>
Date or dates debt was incurred		Basis for the claim:		
Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

2.16	Priority creditor's name and mailing address <b>Crawford Bazil</b> <b>151 W. 228th Street</b> <b>Apt. #16</b> <b>Bronx, NY 10463</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	<b>\$3,355.00</b>	<b>\$3,355.00</b>
Date or dates debt was incurred		Basis for the claim:		
Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

2.17	Priority creditor's name and mailing address <b>Danira Cerio</b> <b>2049 West 7th Street</b> <b>Brooklyn, NY 11223</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	<b>Unknown</b>	<b>\$0.00</b>
Date or dates debt was incurred		Basis for the claim:		
Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

2.18	Priority creditor's name and mailing address <b>David Todd</b> <b>550 Bayridge Parkway</b> <b>Brooklyn, NY 11209</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	<b>\$3,700.00</b>	<b>\$3,700.00</b>
Date or dates debt was incurred		Basis for the claim:		
Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

Debtor **Bay Ridge Automotive Company, LLC**  
Name

Case number (if known)

2.19	Priority creditor's name and mailing address <b>Dennis Cort</b> <b>2237 Schenectady Avenue</b> <b>Brooklyn, NY 11234</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	<b>\$6,117.00</b>	<b>\$6,117.00</b>
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Date or dates debt was incurred

Basis for the claim:

Last 4 digits of account number

Is the claim subject to offset?

Specify Code subsection of PRIORITY  
unsecured claim: 11 U.S.C. § 507(a) (4)

☒ No  
☐ Yes

2.20	Priority creditor's name and mailing address <b>Domingo Rodriguez</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	<b>\$1,522.00</b>	<b>\$1,522.00</b>
------	--	---	-------------------	-------------------

Date or dates debt was incurred

Basis for the claim:

Last 4 digits of account number

Is the claim subject to offset?

Specify Code subsection of PRIORITY  
unsecured claim: 11 U.S.C. § 507(a) (4)

☒ No  
☐ Yes

2.21	Priority creditor's name and mailing address <b>Dwayne Bagot</b> <b>166 East 32nd Street</b> <b>Brooklyn, NY 11226</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	<b>\$4,726.00</b>	<b>\$4,726.00</b>
------	---	---	-------------------	-------------------

Date or dates debt was incurred

Basis for the claim:

Last 4 digits of account number

Is the claim subject to offset?

Specify Code subsection of PRIORITY  
unsecured claim: 11 U.S.C. § 507(a) (4)

☒ No  
☐ Yes

2.22	Priority creditor's name and mailing address <b>Edgar Fajardo</b> <b>119 West 28th Street</b> <b>Bayonne, NJ 07002</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	<b>\$5,804.00</b>	<b>\$5,804.00</b>
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Date or dates debt was incurred

Basis for the claim:

Last 4 digits of account number

Is the claim subject to offset?

Specify Code subsection of PRIORITY  
unsecured claim: 11 U.S.C. § 507(a) (4)

☒ No  
☐ Yes

Debtor **Bay Ridge Automotive Company, LLC**  
Name

Case number (if known)

2.23	Priority creditor's name and mailing address <b>Edward Ramdour</b> <b>117-32 124th Street</b> <b>South Ozone Park, NY 11420</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	<u>\$2,013.00</u>	<u>\$2,013.00</u>
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Date or dates debt was incurred

Basis for the claim:

Last 4 digits of account number

Is the claim subject to offset?

Specify Code subsection of PRIORITY  
unsecured claim: 11 U.S.C. § 507(a) (4)

☒ No  
☐ Yes

2.24	Priority creditor's name and mailing address <b>Elaine Luskin</b> <b>2057 Bay Ridge Parkway</b> <b>Brooklyn, NY 11204</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	<u>\$1,821.00</u>	<u>\$1,821.00</u>
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Date or dates debt was incurred

Basis for the claim:

Last 4 digits of account number

Is the claim subject to offset?

Specify Code subsection of PRIORITY  
unsecured claim: 11 U.S.C. § 507(a) (4)

☒ No  
☐ Yes

2.25	Priority creditor's name and mailing address <b>Everton McLeod</b> <b>3990 Bronx Blvd.</b> <b>Bronx, NY 10466</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	<u>\$2,400.00</u>	<u>\$2,400.00</u>
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Date or dates debt was incurred

Basis for the claim:

Last 4 digits of account number

Is the claim subject to offset?

Specify Code subsection of PRIORITY  
unsecured claim: 11 U.S.C. § 507(a) (4)

☒ No  
☐ Yes

2.26	Priority creditor's name and mailing address <b>Fabrizzo Jaramillo</b> <b>14 1st Avenue</b> <b>East Rockaway, NY 11518</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	<u>\$4,159.00</u>	<u>\$4,159.00</u>
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Date or dates debt was incurred

Basis for the claim:

Last 4 digits of account number

Is the claim subject to offset?

Specify Code subsection of PRIORITY  
unsecured claim: 11 U.S.C. § 507(a) (4)

☒ No  
☐ Yes

Debtor	<b>Bay Ridge Automotive Company, LLC</b> <small>Name</small>	Case number (if known)
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2.27	Priority creditor's name and mailing address <b>Francillia Valentine</b> <b>1 St. Paul Court</b> <b>Apt. 3B</b> <b>Brooklyn, NY 11226</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	<b>\$837.00</b>	<b>\$837.00</b>
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Date or dates debt was incurred  Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	Basis for the claim:  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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2.28	Priority creditor's name and mailing address <b>George Petrossian</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	<b>\$1,414.00</b>	<b>\$1,414.00</b>
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Date or dates debt was incurred  Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	Basis for the claim:  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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2.29	Priority creditor's name and mailing address <b>Giovanni Sanchez</b> <b>358 53rd Street</b> <b>Brooklyn, NY 11220</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	<b>\$5,202.00</b>	<b>\$5,202.00</b>
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Date or dates debt was incurred  Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	Basis for the claim:  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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2.30	Priority creditor's name and mailing address <b>Gregory Davey</b> <b>1637 E. 91st Street</b> <b>Brooklyn, NY 11236</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	<b>\$5,141.00</b>	<b>\$5,141.00</b>
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Date or dates debt was incurred  Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	Basis for the claim:  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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Debtor	<b>Bay Ridge Automotive Company, LLC</b> Name	Case number (if known)
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2.31	Priority creditor's name and mailing address <b>Gzim Krasniqi</b> <b>90 New Hempstead Road</b> <b>New City, NY 10956</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	<b>\$3,945.00</b>	<b>\$3,945.00</b>
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Date or dates debt was incurred  Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	Basis for the claim:  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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2.32	Priority creditor's name and mailing address <b>Harry Pereira</b> <b>261 56th Street</b> <b>Brooklyn, NY 11220</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	<b>\$2,651.00</b>	<b>\$2,651.00</b>
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Date or dates debt was incurred  Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	Basis for the claim:  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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2.33	Priority creditor's name and mailing address <b>Henry Rodriguez</b> <b>34-34 100th Street</b> <b>Corona, NY 11368</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	<b>\$2,662.00</b>	<b>\$2,662.00</b>
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Date or dates debt was incurred  Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	Basis for the claim:  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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2.34	Priority creditor's name and mailing address <b>Jacob Charest</b> <b>1 Merritt Avenue</b> <b>South Amboy, NJ 08879</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	<b>\$2,517.00</b>	<b>\$2,517.00</b>
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Date or dates debt was incurred  Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	Basis for the claim:  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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Debtor **Bay Ridge Automotive Company, LLC**  
Name

Case number (if known)

2.35	Priority creditor's name and mailing address <b>Janet Soto</b> <b>20 Westminster Road</b> <b>Brooklyn, NY 11218</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	<b>\$1,964.00</b>	<b>\$1,964.00</b>
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Date or dates debt was incurred

Basis for the claim:

Last 4 digits of account number

Is the claim subject to offset?

Specify Code subsection of PRIORITY  
unsecured claim: 11 U.S.C. § 507(a) (4)

☒ No  
☐ Yes

2.36	Priority creditor's name and mailing address <b>Jason Wade</b> <b>625 Ocean Avenue</b> <b>Apt. 5H</b> <b>Brooklyn, NY 11226</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	<b>\$6,280.00</b>	<b>\$6,280.00</b>
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Date or dates debt was incurred

Basis for the claim:

Last 4 digits of account number

Is the claim subject to offset?

Specify Code subsection of PRIORITY  
unsecured claim: 11 U.S.C. § 507(a) (4)

☒ No  
☐ Yes

2.37	Priority creditor's name and mailing address <b>John Aquila</b> <b>5665 Amboy Road</b> <b>Staten Island, NY 10309</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	<b>\$5,630.00</b>	<b>\$5,630.00</b>
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Date or dates debt was incurred

Basis for the claim:

Last 4 digits of account number

Is the claim subject to offset?

Specify Code subsection of PRIORITY  
unsecured claim: 11 U.S.C. § 507(a) (4)

☒ No  
☐ Yes

2.38	Priority creditor's name and mailing address <b>John Glynn III</b> <b>1138 Willoughby Avenue</b> <b>Apt. 2R</b> <b>Brooklyn, NY 11221</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	<b>\$5,378.00</b>	<b>\$5,378.00</b>
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Date or dates debt was incurred

Basis for the claim:

Last 4 digits of account number

Is the claim subject to offset?

Specify Code subsection of PRIORITY  
unsecured claim: 11 U.S.C. § 507(a) (4)

☒ No  
☐ Yes

Debtor	<b>Bay Ridge Automotive Company, LLC</b> Name	Case number (if known)
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2.39	Priority creditor's name and mailing address <b>John Mason</b> <b>89 Driggs Street</b> <b>Staten Island, NY 10308</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	<b>\$2,429.00</b>	<b>\$2,429.00</b>
Date or dates debt was incurred		Basis for the claim:		
Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

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2.40	Priority creditor's name and mailing address <b>Jose Amaya</b> <b>29-44 Beach Channel Drive</b> <b>Far Rockaway, NY 11691</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	<b>\$3,743.00</b>	<b>\$3,743.00</b>
Date or dates debt was incurred		Basis for the claim:		
Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

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2.41	Priority creditor's name and mailing address <b>Joseph Pulido</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	<b>\$1,522.00</b>	<b>\$1,522.00</b>
Date or dates debt was incurred		Basis for the claim:		
Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

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2.42	Priority creditor's name and mailing address <b>Kahan Mohamed</b> <b>3000 Ocean Parkway</b> <b>Apt. 7U</b> <b>Brooklyn, NY 11235</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	<b>\$4,197.00</b>	<b>\$4,197.00</b>
Date or dates debt was incurred		Basis for the claim:		
Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

Debtor	<b>Bay Ridge Automotive Company, LLC</b> Name	Case number (if known)
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2.43	Priority creditor's name and mailing address <b>Kevin Sheehan</b> <b>24 Albert Drive</b> <b>Old Bridge, NJ 08857</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	<b>\$6,682.00</b>	<b>\$6,682.00</b>
Date or dates debt was incurred		Basis for the claim:		
Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

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2.44	Priority creditor's name and mailing address <b>Khalid Yosef</b> <b>46 Paerdegat 15th Street</b> <b>Brooklyn, NY 11236</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	<b>\$1,789.00</b>	<b>\$1,789.00</b>
Date or dates debt was incurred		Basis for the claim:		
Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

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2.45	Priority creditor's name and mailing address <b>Kristine Hoff</b> <b>162 Avenue S</b> <b>Apt. 3F</b> <b>Brooklyn, NY 11223</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	<b>\$1,314.00</b>	<b>\$1,314.00</b>
Date or dates debt was incurred		Basis for the claim:		
Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

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2.46	Priority creditor's name and mailing address <b>Leodan Melendez</b> <b>2432 Ocean Avenue</b> <b>2nd Floor</b> <b>Brooklyn, NY 11229</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	<b>\$1,560.00</b>	<b>\$1,560.00</b>
Date or dates debt was incurred		Basis for the claim:		
Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

Debtor **Bay Ridge Automotive Company, LLC**  
Name

Case number (if known)

2.47	Priority creditor's name and mailing address <b>Levi Toledo</b> <b>217 Thompson Street</b> <b>Apt. #1</b> <b>New York, NY 10012</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	<u>\$5,126.00</u>	<u>\$5,126.00</u>
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Date or dates debt was incurred

Basis for the claim:

Last 4 digits of account number

Is the claim subject to offset?

Specify Code subsection of PRIORITY  
unsecured claim: 11 U.S.C. § 507(a) (4)

☒ No  
☐ Yes

2.48	Priority creditor's name and mailing address <b>Luis Santiago</b> <b>336 42nd Street</b> <b>Apt. #1</b> <b>Brooklyn, NY 11232</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	<u>\$5,955.00</u>	<u>\$5,955.00</u>
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Date or dates debt was incurred

Basis for the claim:

Last 4 digits of account number

Is the claim subject to offset?

Specify Code subsection of PRIORITY  
unsecured claim: 11 U.S.C. § 507(a) (4)

☒ No  
☐ Yes

2.49	Priority creditor's name and mailing address <b>Maged Misak</b> <b>44 Poets Circle</b> <b>Staten Island, NY 10312</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	<u>\$2,149.00</u>	<u>\$2,149.00</u>
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Date or dates debt was incurred

Basis for the claim:

Last 4 digits of account number

Is the claim subject to offset?

Specify Code subsection of PRIORITY  
unsecured claim: 11 U.S.C. § 507(a) (4)

☒ No  
☐ Yes

2.50	Priority creditor's name and mailing address <b>Marc Miranda</b> <b>214 St. John Avenue</b> <b>Staten Island, NY 10314</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	<u>\$3,082.00</u>	<u>\$3,082.00</u>
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Date or dates debt was incurred

Basis for the claim:

Last 4 digits of account number

Is the claim subject to offset?

Specify Code subsection of PRIORITY  
unsecured claim: 11 U.S.C. § 507(a) (4)

☒ No  
☐ Yes

Debtor	<b>Bay Ridge Automotive Company, LLC</b> Name	Case number (if known)
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2.51	Priority creditor's name and mailing address <b>Martin Mooney</b> <b>92 Van Pelt Avenue</b> <b>Staten Island, NY 10303</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	<b>\$1,789.00</b>	<b>\$1,789.00</b>
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Date or dates debt was incurred  Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	Basis for the claim:  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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2.52	Priority creditor's name and mailing address <b>Mary Guinto</b> <b>311 82nd Street</b> <b>Brooklyn, NY 11209</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	<b>\$2,660.00</b>	<b>\$2,660.00</b>
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Date or dates debt was incurred  Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	Basis for the claim:  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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2.53	Priority creditor's name and mailing address <b>Matthew Cocheo</b> <b>35 Long Meadow Drive</b> <b>Staatsburg, NY 12580</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	<b>\$3,634.00</b>	<b>\$3,634.00</b>
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Date or dates debt was incurred  Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	Basis for the claim:  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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2.54	Priority creditor's name and mailing address <b>Melanie Madeo</b> <b>24 Fairlawn Loop</b> <b>Staten Island, NY 10308</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	<b>\$1,872.00</b>	<b>\$1,872.00</b>
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Date or dates debt was incurred  Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	Basis for the claim:  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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Debtor	<b>Bay Ridge Automotive Company, LLC</b> Name	Case number (if known)
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2.55	Priority creditor's name and mailing address <b>Michael Pulido</b> <b>86-30 139th Street</b> <b>Jamaica, NY 11435</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	\$5,881.00	\$5,881.00
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Date or dates debt was incurred  Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	Basis for the claim:  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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2.56	Priority creditor's name and mailing address <b>Moustafa Moussa</b> <b>19 Amador Street</b> <b>Staten Island, NY 10303</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	\$5,419.00	\$5,419.00
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Date or dates debt was incurred  Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	Basis for the claim:  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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2.57	Priority creditor's name and mailing address <b>Nigel Leandro</b> <b>2014 Blackrock Avenue</b> <b>Bronx, NY 10472</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	Unknown	\$0.00
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Date or dates debt was incurred  Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	Basis for the claim:  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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2.58	Priority creditor's name and mailing address <b>NYS Dept. of Taxation</b> <b>Bankruptcy Division</b> <b>PO Box 5300</b> <b>Albany, NY 12205-0300</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	\$760,904.00	\$760,904.00
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Date or dates debt was incurred  Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (8)	Basis for the claim:  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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Debtor	<b>Bay Ridge Automotive Company, LLC</b> Name	Case number (if known)
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2.59	Priority creditor's name and mailing address <b>Omar Henry</b> <b>3410 Glenwood Avenue</b> <b>Brooklyn, NY 11210</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	<b>\$3,200.00</b>	<b>\$3,200.00</b>
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Date or dates debt was incurred  Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	Basis for the claim:  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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2.60	Priority creditor's name and mailing address <b>Pamela Morgan</b> <b>336 93rd Street</b> <b>Apt. C6</b> <b>Brooklyn, NY 11209</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	<b>\$700.00</b>	<b>\$700.00</b>
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Date or dates debt was incurred  Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	Basis for the claim:  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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2.61	Priority creditor's name and mailing address <b>Peter Rossi</b> <b>133 Adams Street</b> <b>Staten Island, NY 10306</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	<b>\$2,448.00</b>	<b>\$2,448.00</b>
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Date or dates debt was incurred  Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	Basis for the claim:  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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2.62	Priority creditor's name and mailing address <b>Raymond Torres</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	<b>\$1,997.00</b>	<b>\$1,997.00</b>
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Date or dates debt was incurred  Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	Basis for the claim:  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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Debtor	<b>Bay Ridge Automotive Company, LLC</b> <small>Name</small>	Case number (if known)
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2.63	Priority creditor's name and mailing address <b>Richard Cappetta Jr.</b> <b>14 True Harbor Way</b> <b>West Islip, NY 11795</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	<b>\$2,500.00</b>	<b>\$2,500.00</b>
Date or dates debt was incurred		Basis for the claim:		
Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

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2.64	Priority creditor's name and mailing address <b>Robert Mooney</b> <b>92 Van Pelt Avenue</b> <b>Staten Island, NY 10303</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	<b>\$5,888.00</b>	<b>\$5,888.00</b>
Date or dates debt was incurred		Basis for the claim:		
Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

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2.65	Priority creditor's name and mailing address <b>Roger Cockerham</b> <b>245 31B 77th Crescent</b> <b>2nd Floor</b> <b>Bellerose, NY 11426</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	<b>\$4,114.00</b>	<b>\$4,114.00</b>
Date or dates debt was incurred		Basis for the claim:		
Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

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2.66	Priority creditor's name and mailing address <b>Roger S. Beepath</b> <b>41 Richard Lane</b> <b>Staten Island, NY 10314</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	<b>\$2,118.00</b>	<b>\$2,118.00</b>
Date or dates debt was incurred		Basis for the claim:		
Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

Debtor **Bay Ridge Automotive Company, LLC**  
Name

Case number (if known)

<b>2.67</b>	<b>Priority creditor's name and mailing address</b> <b>Rosalie Nunez</b> <b>91 Ann Street</b> <b>1st Floor</b> <b>Staten Island, NY 10302</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	<b>\$1,353.00</b> <b>\$1,353.00</b>
<hr/>			
Date or dates debt was incurred		Basis for the claim:	
<hr/>			
Last 4 digits of account number		Is the claim subject to offset?	
Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)		<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
<hr/>			
<b>2.68</b>	<b>Priority creditor's name and mailing address</b> <b>Russell Moore</b> <b>1006 Halsey Street</b> <b>Brooklyn, NY 11207</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	<b>\$1,708.00</b> <b>\$1,708.00</b>
<hr/>			
Date or dates debt was incurred		Basis for the claim:	
<hr/>			
Last 4 digits of account number		Is the claim subject to offset?	
Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)		<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
<hr/>			
<b>2.69</b>	<b>Priority creditor's name and mailing address</b> <b>Saif Ahmed</b> <b>139-54 87th Road</b> <b>Jamaica, NY 11435</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	<b>\$5,311.00</b> <b>\$5,311.00</b>
<hr/>			
Date or dates debt was incurred		Basis for the claim:	
<hr/>			
Last 4 digits of account number		Is the claim subject to offset?	
Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)		<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
<hr/>			
<b>2.70</b>	<b>Priority creditor's name and mailing address</b> <b>Shawn Jaipaul</b> <b>117-21 124th Street</b> <b>South Ozone Park, NY 11420</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	<b>\$1,726.00</b> <b>\$1,726.00</b>
<hr/>			
Date or dates debt was incurred		Basis for the claim:	
<hr/>			
Last 4 digits of account number		Is the claim subject to offset?	
Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)		<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	

Debtor	<b>Bay Ridge Automotive Company, LLC</b> Name	Case number (if known)
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2.71	Priority creditor's name and mailing address <b>Siarhei Samsonau</b> <b>1311 Brightwater Avenue</b> <b>Brooklyn, NY 11235</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	Unknown	\$0.00
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Date or dates debt was incurred  Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	Basis for the claim:  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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2.72	Priority creditor's name and mailing address <b>Steven Kupseta</b> <b>230 Timber Ridge Drive</b> <b>Staten Island, NY 10306</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	\$3,428.00	\$3,428.00
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Date or dates debt was incurred  Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	Basis for the claim:  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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2.73	Priority creditor's name and mailing address <b>Theresa Moseder</b> <b>1458 72nd Street</b> <b>Brooklyn, NY 11228</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	\$714.00	\$714.00
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Date or dates debt was incurred  Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	Basis for the claim:  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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2.74	Priority creditor's name and mailing address <b>Thomas Desola</b> <b>1239 76th Street</b> <b>Brooklyn, NY 11228</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	\$5,914.00	\$5,914.00
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Date or dates debt was incurred  Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	Basis for the claim:  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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Debtor **Bay Ridge Automotive Company, LLC**  
Name

Case number (if known)

2.75	Priority creditor's name and mailing address <b>Timothy Orland</b> <b>3687 Hylan Blvd.</b> <b>Staten Island, NY 10308</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	<b>Unknown</b>	<b>\$0.00</b>
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Date or dates debt was incurred

Basis for the claim:

Last 4 digits of account number

Is the claim subject to offset?

Specify Code subsection of PRIORITY  
unsecured claim: 11 U.S.C. § 507(a) (4)

☒ No  
☐ Yes

2.76	Priority creditor's name and mailing address <b>Vlad Nevryanskiy</b> <b>2705 Kings Highway</b> <b>Apt. 5D</b> <b>Brooklyn, NY 11229</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	<b>Unknown</b>	<b>\$0.00</b>
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Date or dates debt was incurred

Basis for the claim:

Last 4 digits of account number

Is the claim subject to offset?

Specify Code subsection of PRIORITY  
unsecured claim: 11 U.S.C. § 507(a) (4)

☒ No  
☐ Yes

2.77	Priority creditor's name and mailing address <b>Willy Sanchez</b> <b>1078 Belmont Avenue</b> <b>Brooklyn, NY 11208</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	<b>\$1,986.00</b>	<b>\$1,986.00</b>
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Date or dates debt was incurred

Basis for the claim:

Last 4 digits of account number

Is the claim subject to offset?

Specify Code subsection of PRIORITY  
unsecured claim: 11 U.S.C. § 507(a) (4)

☒ No  
☐ Yes

2.78	Priority creditor's name and mailing address <b>Yuri Frid</b> <b>6 Skyview Drive</b> <b>Rockaway, NJ 07866</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	<b>\$12,850.00</b>	<b>\$768.00</b>
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Date or dates debt was incurred

Basis for the claim:

Last 4 digits of account number

Is the claim subject to offset?

Specify Code subsection of PRIORITY  
unsecured claim: 11 U.S.C. § 507(a) (4)

☒ No  
☐ Yes

Debtor **Bay Ridge Automotive Company, LLC**  
Name

Case number (if known)

2.79	Priority creditor's name and mailing address <b>Zaur Rakhmilov</b> <b>39 Keating Street</b> <b>Staten Island, NY 10309</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	<b>Unknown</b> <b>\$0.00</b>
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Date or dates debt was incurred

Basis for the claim:

Last 4 digits of account number

Is the claim subject to offset?

Specify Code subsection of PRIORITY  
unsecured claim: 11 U.S.C. § 507(a) (4)

☒ No  
☐ Yes

2.80	Priority creditor's name and mailing address <b>Zhijian Huang</b> <b>1653 74th Street</b> <b>Brooklyn, NY 11204</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	<b>\$4,026.00</b> <b>\$4,026.00</b>
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Date or dates debt was incurred

Basis for the claim:

Last 4 digits of account number

Is the claim subject to offset?

Specify Code subsection of PRIORITY  
unsecured claim: 11 U.S.C. § 507(a) (4)

☒ No  
☐ Yes

**Part 2: List All Creditors with NONPRIORITY Unsecured Claims**

3. List in alphabetical order all of the creditors with nonpriority unsecured claims. If the debtor has more than 6 creditors with nonpriority unsecured claims, fill out and attach the Additional Page of Part 2.

Amount of claim

3.1	Nonpriority creditor's name and mailing address <b>ACE Auto Storage</b> <b>95 Rector Street</b> <b>Staten Island, NY 10310</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	<b>\$100.00</b>
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Date(s) debt was incurred

Basis for the claim:

Last 4 digits of account number

Is the claim subject to offset? ☒ No ☐ Yes

3.2	Nonpriority creditor's name and mailing address <b>AER Sales LP</b> <b>1605 Surveyor Blvd.</b> <b>Carrollton, TX 75006</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	<b>\$75,950.88</b>
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Date(s) debt was incurred

Basis for the claim:

Last 4 digits of account number

Is the claim subject to offset? ☒ No ☐ Yes

3.3	Nonpriority creditor's name and mailing address <b>Aircore Distributions</b> <b>100 Rose Avenue</b> <b>Hempstead, NY 11550-6645</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	<b>\$239.43</b>
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Date(s) debt was incurred

Basis for the claim:

Last 4 digits of account number

Is the claim subject to offset? ☒ No ☐ Yes

Debtor **Bay Ridge Automotive Company, LLC**  
Name

Case number (if known) \_\_\_\_\_

<b>3.4</b>	<b>Nonpriority creditor's name and mailing address</b> <b>Alpha Fire and Security</b> <b>90 Quentin Road</b> <b>Brooklyn, NY 11223</b> Date(s) debt was incurred ____ Last 4 digits of account number ____	<b>As of the petition filing date, the claim is: Check all that apply.</b> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed <b>Basis for the claim:</b> ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$277.63</b>
<hr/>			
<b>3.5</b>	<b>Nonpriority creditor's name and mailing address</b> <b>Aramark Refreshment Services</b> <b>6800 Jericho Turnpike</b> <b>Suite 120W</b> <b>Syosset, NY 11791</b> Date(s) debt was incurred ____ Last 4 digits of account number ____	<b>As of the petition filing date, the claim is: Check all that apply.</b> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed <b>Basis for the claim:</b> ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$70.76</b>
<hr/>			
<b>3.6</b>	<b>Nonpriority creditor's name and mailing address</b> <b>Aramark Uniform Group Inc.</b> <b>PO Box 28050</b> <b>New York, NY 10087-8050</b> Date(s) debt was incurred ____ Last 4 digits of account number ____	<b>As of the petition filing date, the claim is: Check all that apply.</b> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed <b>Basis for the claim:</b> ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$9,444.18</b>
<hr/>			
<b>3.7</b>	<b>Nonpriority creditor's name and mailing address</b> <b>Assured Environments</b> <b>45 Broadway, 10th Floor</b> <b>New York, NY 10006</b> Date(s) debt was incurred ____ Last 4 digits of account number ____	<b>As of the petition filing date, the claim is: Check all that apply.</b> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed <b>Basis for the claim:</b> ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$2,334.60</b>
<hr/>			
<b>3.8</b>	<b>Nonpriority creditor's name and mailing address</b> <b>Auto Alert</b> <b>9050 Irvine Center Drive</b> <b>Irvine, CA 92618</b> Date(s) debt was incurred ____ Last 4 digits of account number ____	<b>As of the petition filing date, the claim is: Check all that apply.</b> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed <b>Basis for the claim:</b> ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$21,387.45</b>
<hr/>			
<b>3.9</b>	<b>Nonpriority creditor's name and mailing address</b> <b>Autocare Network LLC</b> <b>1735 N. Ocean Road</b> <b>Suite D</b> <b>Medford, NY 11763</b> Date(s) debt was incurred ____ Last 4 digits of account number ____	<b>As of the petition filing date, the claim is: Check all that apply.</b> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed <b>Basis for the claim:</b> ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$4,715.00</b>
<hr/>			
<b>3.10</b>	<b>Nonpriority creditor's name and mailing address</b> <b>Autoloop</b> <b>PO Box 1266</b> <b>Clearwater, FL 33757-1266</b> Date(s) debt was incurred ____ Last 4 digits of account number ____	<b>As of the petition filing date, the claim is: Check all that apply.</b> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed <b>Basis for the claim:</b> ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$35,500.19</b>

Debtor **Bay Ridge Automotive Company, LLC**

Case number (if known) \_\_\_\_\_

Name

3.11	<b>Nonpriority creditor's name and mailing address</b> <b>B &amp; I Auto Supply</b> <b>PO Box 128</b> <b>135 Commerce Drive</b> <b>Fort Washington, PA 19034</b>  Date(s) debt was incurred ____ Last 4 digits of account number ____	<b>As of the petition filing date, the claim is: Check all that apply.</b> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b> ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$0.00</b>
3.12	<b>Nonpriority creditor's name and mailing address</b> <b>Benmatt Industries Inc.</b> <b>PO Box 820959</b> <b>Philadelphia, PA 19182</b>  Date(s) debt was incurred ____ Last 4 digits of account number ____	<b>As of the petition filing date, the claim is: Check all that apply.</b> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b> ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$1,448.09</b>
3.13	<b>Nonpriority creditor's name and mailing address</b> <b>Bernie's</b> <b>147 Linden Avenue</b> <b>Westbury, NY 11590</b>  Date(s) debt was incurred ____ Last 4 digits of account number ____	<b>As of the petition filing date, the claim is: Check all that apply.</b> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b> ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$275.00</b>
3.14	<b>Nonpriority creditor's name and mailing address</b> <b>Best Car Wash &amp; Detail Inc.</b> <b>902 65th Street</b> <b>Brooklyn, NY 11219</b>  Date(s) debt was incurred ____ Last 4 digits of account number ____	<b>As of the petition filing date, the claim is: Check all that apply.</b> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b> ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$400.00</b>
3.15	<b>Nonpriority creditor's name and mailing address</b> <b>Beveridge &amp; Diamond, P.C.</b> <b>1350 I Street N.W.</b> <b>Suite 700</b> <b>Washington, DC 20005-3311</b>  Date(s) debt was incurred ____ Last 4 digits of account number ____	<b>As of the petition filing date, the claim is: Check all that apply.</b> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b> ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$12,238.47</b>
3.16	<b>Nonpriority creditor's name and mailing address</b> <b>Brandon Ford</b> <b>9090 E. Adamo Dr.</b> <b>Tampa, FL 33619</b>  Date(s) debt was incurred ____ Last 4 digits of account number ____	<b>As of the petition filing date, the claim is: Check all that apply.</b> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b> ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$152.63</b>
3.17	<b>Nonpriority creditor's name and mailing address</b> <b>Brooklyn Auto Group</b> <b>2286 Flatbush Avenue</b> <b>Brooklyn, NY 11234</b>  Date(s) debt was incurred ____ Last 4 digits of account number ____	<b>As of the petition filing date, the claim is: Check all that apply.</b> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b> ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$48.61</b>

Debtor **Bay Ridge Automotive Company, LLC**

Name

Case number (if known)

3.18	Nonpriority creditor's name and mailing address <b>Canon Solutions America Inc.</b> <b>15004 Collections Center Drive</b> <b>Chicago, IL 60693</b> Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$11,248.57</b>
3.19	Nonpriority creditor's name and mailing address <b>Car Tone Collision</b> <b>815 39th Street</b> <b>Brooklyn, NY 11232-1446</b> Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$9,652.99</b>
3.20	Nonpriority creditor's name and mailing address <b>Car-Tone Collision</b> <b>815-817 39th Street</b> <b>Brooklyn, NY 11232</b> Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$1,275.00</b>
3.21	Nonpriority creditor's name and mailing address <b>Carfax, Inc.</b> <b>16630 Collection Center Drive</b> <b>Chicago, IL 60693</b> Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$2,640.60</b>
3.22	Nonpriority creditor's name and mailing address <b>Carlos Service Lift Inc.</b> <b>45 Jackson Street</b> <b>Apt. B20</b> <b>Hempstead, NY 11550</b> Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$2,225.00</b>
3.23	Nonpriority creditor's name and mailing address <b>Carnow Inc.</b> <b>25 South Park Street</b> <b>Hanover, NH 03755</b> Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$5,180.00</b>
3.24	Nonpriority creditor's name and mailing address <b>Cars.com, LLC</b> <b>2631 Solution Center</b> <b>Chicago, IL 60677-0001</b> Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$17,470.19</b>



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3.25	Nonpriority creditor's name and mailing address <b>Carsforsale.com Inc.</b> <b>PO Box 91537</b> <b>Sioux Falls, SD 57109</b> Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$198.00</b>
3.26	Nonpriority creditor's name and mailing address <b>Chase Vehicle Exchange, Inc.</b> <b>14800 Frye Road</b> <b>1st Floor</b> <b>Fort Worth, TX 76155</b> Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$660.00</b>
3.27	Nonpriority creditor's name and mailing address <b>Chelsea Auto Diagnostic</b> <b>204 Hamilton Avenue</b> <b>Brooklyn, NY 11231-1831</b> Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$1,350.00</b>
3.28	Nonpriority creditor's name and mailing address <b>Con Edison</b> <b>JAF Station</b> <b>PO Box 1702</b> <b>New York, NY 10116</b> Date(s) debt was incurred ____ Last 4 digits of account number <u>0032</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$2,511.61</b>
3.29	Nonpriority creditor's name and mailing address <b>Con Edison</b> <b>JAF Station</b> <b>PO Box 1702</b> <b>New York, NY 10116</b> Date(s) debt was incurred ____ Last 4 digits of account number <u>0022</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$0.00</b>
3.30	Nonpriority creditor's name and mailing address <b>Con Edison</b> <b>JAF Station</b> <b>PO Box 1702</b> <b>New York, NY 10116-1702</b> Date(s) debt was incurred ____ Last 4 digits of account number <u>0001</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$0.00</b>
3.31	Nonpriority creditor's name and mailing address <b>Con Edison</b> <b>JAF Station</b> <b>PO Box 1702</b> <b>New York, NY 10003</b> Date(s) debt was incurred ____ Last 4 digits of account number <u>4051</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$2,768.96</b>

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3.32	Nonpriority creditor's name and mailing address <b>Coney Island Auto Parts</b> <b>2317 McDonald Avenue</b> <b>Brooklyn, NY 11223-4737</b> Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$0.00</b>
3.33	Nonpriority creditor's name and mailing address <b>Corelogic Credco LLC</b> <b>PO Box 847070</b> <b>Dallas, TX 75284-7070</b> Date(s) debt was incurred _____ Last 4 digits of account number <b>0839</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$643.22</b>
3.34	Nonpriority creditor's name and mailing address <b>Crystal Fusion Technologies</b> <b>PO Box 1298</b> <b>West Babylon, NY 11704</b> Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$0.00</b>
3.35	Nonpriority creditor's name and mailing address <b>Dana Motors</b> <b>266 W. Service Road</b> <b>Staten Island, NY 10314-4753</b> Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$232.05</b>
3.36	Nonpriority creditor's name and mailing address <b>Danken Auto Parts</b> <b>84 18th Street</b> <b>Brooklyn, NY 11232</b> Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$15,785.60</b>
3.37	Nonpriority creditor's name and mailing address <b>Dealer Focus LLC</b> <b>1600 Osgood Street</b> <b>Suite 3068</b> <b>North Andover, MA 01845</b> Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$9,427.00</b>
3.38	Nonpriority creditor's name and mailing address <b>Dealer Storage Corp.</b> <b>PO Box 320212</b> <b>Brooklyn, NY 11232</b> Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$74.25</b>

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3.39	Nonpriority creditor's name and mailing address <b>Dealerrater.com, LLC</b> <b>75 Remittance Dr.</b> <b>Dept. 6767</b> <b>Chicago, IL 60675-6767</b> Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$2,088.36</b>
3.40	Nonpriority creditor's name and mailing address <b>Dealersocket, Inc.</b> <b>PO Box 843876</b> <b>Los Angeles, CA 90084-5423</b> Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$8,749.86</b>
3.41	Nonpriority creditor's name and mailing address <b>Dige Associates LLC</b> <b>2707 Landing Avenue</b> <b>Bellmore, NY 11710</b> Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$125,156.40</b>
3.42	Nonpriority creditor's name and mailing address <b>Dish</b> <b>Dept. 0063</b> <b>Palatine, IL 60055-0063</b> Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$71.42</b>
3.43	Nonpriority creditor's name and mailing address <b>Drive Digital Group</b> <b>357 Interstate Blvd.</b> <b>Sarasota, FL 34240</b> Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$4,002.00</b>
3.44	Nonpriority creditor's name and mailing address <b>Drivematic</b> <b>349 Interstate Blvd.</b> <b>Sarasota, FL 34240</b> Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$1,000.00</b>
3.45	Nonpriority creditor's name and mailing address <b>Edmunds.com, Inc.</b> <b>PO Box 783531</b> <b>Philadelphia, PA 19178-3531</b> Date(s) debt was incurred ____ Last 4 digits of account number <u>2442</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$23,787.34</b>

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<b>3.46</b>	<b>Nonpriority creditor's name and mailing address</b> <b>Federal Safety Compliance Inc.</b> <b>2900 Delk Road</b> <b>Suite 700</b> <b>Marietta, GA 30067</b> Date(s) debt was incurred ____ Last 4 digits of account number ____	<b>As of the petition filing date, the claim is: Check all that apply.</b> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$298.50</b>
<b>3.47</b>	<b>Nonpriority creditor's name and mailing address</b> <b>FEDEX</b> <b>PO Box 371461</b> <b>Pittsburgh, PA 15250-7461</b> Date(s) debt was incurred ____ Last 4 digits of account number ____	<b>As of the petition filing date, the claim is: Check all that apply.</b> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$761.90</b>
<b>3.48</b>	<b>Nonpriority creditor's name and mailing address</b> <b>FEDEX</b> <b>PO Box 371461</b> <b>Pittsburgh, PA 15250-7461</b> Date(s) debt was incurred ____ Last 4 digits of account number <u>8650</u>	<b>As of the petition filing date, the claim is: Check all that apply.</b> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$1,254.97</b>
<b>3.49</b>	<b>Nonpriority creditor's name and mailing address</b> <b>First Unum Life Insurance Co.</b> <b>PO Box 406927</b> <b>Atlanta, GA 30384-6927</b> Date(s) debt was incurred ____ Last 4 digits of account number ____	<b>As of the petition filing date, the claim is: Check all that apply.</b> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$2,817.30</b>
<b>3.50</b>	<b>Nonpriority creditor's name and mailing address</b> <b>Ford Motor Company</b> <b>16800 Executive Plaza</b> <b>Dearborn, MI 48126</b> Date(s) debt was incurred ____ Last 4 digits of account number ____	<b>As of the petition filing date, the claim is: Check all that apply.</b> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$42,708.30</b>
<b>3.51</b>	<b>Nonpriority creditor's name and mailing address</b> <b>High Touch, LLC</b> <b>PO Box 410</b> <b>Yonkers, NY 10710</b> Date(s) debt was incurred ____ Last 4 digits of account number ____	<b>As of the petition filing date, the claim is: Check all that apply.</b> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$5,630.28</b>
<b>3.52</b>	<b>Nonpriority creditor's name and mailing address</b> <b>Hilna Motor Service</b> <b>2050 Stillwell Avenue</b> <b>Brooklyn, NY 11223-3424</b> Date(s) debt was incurred ____ Last 4 digits of account number ____	<b>As of the petition filing date, the claim is: Check all that apply.</b> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$85.00</b>

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3.53	Nonpriority creditor's name and mailing address <b>Ideal Vending &amp; Coffee Service</b> <b>219 9th Street</b> <b>Brooklyn, NY 11215</b>  Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <span style="float: right;"><b>\$725.98</b></span> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  Basis for the claim: _____  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.54	Nonpriority creditor's name and mailing address <b>IFM North America</b> <b>PO Box 77000</b> <b>Dept. #77770</b> <b>Detroit, MI 48277-0770</b>  Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <span style="float: right;"><b>\$4,450.80</b></span> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  Basis for the claim: _____  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.55	Nonpriority creditor's name and mailing address <b>Independent Dealer Group, Inc.</b> <b>851 International Pkwy</b> <b>Suite 100</b> <b>Richardson, TX 75085</b>  Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <span style="float: right;"><b>\$19,385.00</b></span> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  Basis for the claim: _____  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.56	Nonpriority creditor's name and mailing address <b>International Truck &amp; Repair</b> <b>111 58th Street</b> <b>Brooklyn, NY 11220-2515</b>  Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <span style="float: right;"><b>\$1,007.28</b></span> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  Basis for the claim: _____  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.57	Nonpriority creditor's name and mailing address <b>J &amp; V Auto Parts</b> <b>519 E. 83rd Street</b> <b>Brooklyn, NY 11236</b>  Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <span style="float: right;"><b>\$150.00</b></span> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  Basis for the claim: _____  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.58	Nonpriority creditor's name and mailing address <b>Jacmar Enterprises Inc.</b> <b>PO Box 600</b> <b>East Northport, NY 11731</b>  Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <span style="float: right;"><b>\$0.00</b></span> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  Basis for the claim: _____  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.59	Nonpriority creditor's name and mailing address <b>Jets Towing and Auto</b> <b>1391 Utica Avenue</b> <b>Brooklyn, NY 11203</b>  Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <span style="float: right;"><b>\$8,041.00</b></span> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  Basis for the claim: _____  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.60	Nonpriority creditor's name and mailing address <b>Joe Sons Auto Parts</b> <b>797 4th Avenue</b> <b>Brooklyn, NY 11232</b> Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$6,783.99</b>
3.61	Nonpriority creditor's name and mailing address <b>Joseph S. Aboyoun, Esq.</b> <b>77 Bloomfield Avenue</b> <b>Route 46</b> <b>Pine Brook, NJ 07058</b> Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$29,331.13</b>
3.62	Nonpriority creditor's name and mailing address <b>KAJ Petroleum Inc.</b> <b>5701 2nd Avenue</b> <b>Brooklyn, NY 11220</b> Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$6,159.00</b>
3.63	Nonpriority creditor's name and mailing address <b>Kings Chrysler</b> <b>2286 Flatbush Avenue</b> <b>Brooklyn, NY 11234-4518</b> Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$13.24</b>
3.64	Nonpriority creditor's name and mailing address <b>Kwicksilver</b> <b>703 3rd Avenue</b> <b>Brooklyn, NY 11232</b> Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$740.00</b>
3.65	Nonpriority creditor's name and mailing address <b>L &amp; S Collision</b> <b>41 Rector Street</b> <b>Staten Island, NY 10310-1223</b> Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$42,167.00</b>
3.66	Nonpriority creditor's name and mailing address <b>Liberty Glass</b> <b>65-02 Queens Blvd.</b> <b>Woodside, NY 11377</b> Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$1,625.00</b>

Debtor <b>Bay Ridge Automotive Company, LLC</b>		Case number (if known) _____	
Name _____			

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3.67	<b>Nonpriority creditor's name and mailing address</b> <b>Lojack</b> <b>PO Box 846111</b> <b>Boston, MA 02284</b> Date(s) debt was incurred _____ Last 4 digits of account number _____	<b>As of the petition filing date, the claim is: Check all that apply.</b> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$1,001.50</b>
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3.68	<b>Nonpriority creditor's name and mailing address</b> <b>Long Life Truck and Auto</b> <b>3904 Fort Hamilton Pkwy</b> <b>Brooklyn, NY 11218-1917</b> Date(s) debt was incurred _____ Last 4 digits of account number _____	<b>As of the petition filing date, the claim is: Check all that apply.</b> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$580.00</b>
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3.69	<b>Nonpriority creditor's name and mailing address</b> <b>Lot Capture, LLC</b> <b>349 Interstate Blvd.</b> <b>Sarasota, FL 34240</b> Date(s) debt was incurred _____ Last 4 digits of account number _____	<b>As of the petition filing date, the claim is: Check all that apply.</b> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$200.00</b>
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3.70	<b>Nonpriority creditor's name and mailing address</b> <b>MD Auto</b> <b>PO Box 485</b> <b>Merrick, NY 11566</b> Date(s) debt was incurred _____ Last 4 digits of account number _____	<b>As of the petition filing date, the claim is: Check all that apply.</b> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$5,913.20</b>
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3.71	<b>Nonpriority creditor's name and mailing address</b> <b>Member Services, Inc.</b> <b>3604 NW Frontage Road</b> <b>PO Box 1760</b> <b>Bentonville, AR 72712</b> Date(s) debt was incurred _____ Last 4 digits of account number _____	<b>As of the petition filing date, the claim is: Check all that apply.</b> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$750.00</b>
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3.72	<b>Nonpriority creditor's name and mailing address</b> <b>Michael Liliakakis</b> <b>235 89th Street</b> <b>Brooklyn, NY 11209</b> Date(s) debt was incurred _____ Last 4 digits of account number _____	<b>As of the petition filing date, the claim is: Check all that apply.</b> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$17,800.00</b>
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3.73	<b>Nonpriority creditor's name and mailing address</b> <b>Mobility Works Commercial</b> <b>1090 West Wilbeth</b> <b>Akron, OH 44314</b> Date(s) debt was incurred _____ Last 4 digits of account number _____	<b>As of the petition filing date, the claim is: Check all that apply.</b> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$1,800.00</b>
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Debtor **Bay Ridge Automotive Company, LLC**  
Name

Case number (if known)

3.74	Nonpriority creditor's name and mailing address <b>Motivated Security Services</b> <b>PO Box 215</b> <b>Somerville, NJ 08876</b> Date(s) debt was incurred ____ Last 4 digits of account number <u>D222</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$39,566.56</b>
3.75	Nonpriority creditor's name and mailing address <b>My Way Auto Repair &amp; Glass</b> <b>6202 3rd Avenue</b> <b>Brooklyn, NY 11220-4408</b> Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$3,325.00</b>
3.76	Nonpriority creditor's name and mailing address <b>Nac Van and Truck</b> <b>590 West Merrick Road</b> <b>Valley Stream, NY 11580</b> Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$1,508.01</b>
3.77	Nonpriority creditor's name and mailing address <b>National Credit Center</b> <b>PO Box 40285</b> <b>Los Angeles, CA 90074-0285</b> Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$95.83</b>
3.78	Nonpriority creditor's name and mailing address <b>National Grid</b> <b>PO Box 11741</b> <b>Newark, NJ 07101-9839</b> Date(s) debt was incurred ____ Last 4 digits of account number <u>8253</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$9,280.20</b>
3.79	Nonpriority creditor's name and mailing address <b>National Grid</b> <b>PO Box 11741</b> <b>Newark, NJ 07101-9839</b> Date(s) debt was incurred ____ Last 4 digits of account number <u>7620</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$1,564.73</b>
3.80	Nonpriority creditor's name and mailing address <b>National Grid</b> <b>PO Box 11741</b> <b>Newark, NJ 07101-4741</b> Date(s) debt was incurred ____ Last 4 digits of account number <u>5803</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$142.43</b>



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<b>3.81</b>	<b>Nonpriority creditor's name and mailing address</b> <b>National Grid</b> <b>PO Box 11741</b> <b>Newark, NJ 07101-9839</b> Date(s) debt was incurred _____ Last 4 digits of account number <u>5793</u>	<b>As of the petition filing date, the claim is: Check all that apply.</b> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed <b>Basis for the claim:</b> _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$840.53</b>
<b>3.82</b>	<b>Nonpriority creditor's name and mailing address</b> <b>New Generation Auto Parts</b> <b>529 63rd Street</b> <b>Brooklyn, NY 11220</b> Date(s) debt was incurred _____ Last 4 digits of account number _____	<b>As of the petition filing date, the claim is: Check all that apply.</b> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed <b>Basis for the claim:</b> _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$2.50</b>
<b>3.83</b>	<b>Nonpriority creditor's name and mailing address</b> <b>New GH Berlin Oil Company</b> <b>42 Rumsey Raod</b> <b>East Hartford, CT 06108</b> Date(s) debt was incurred _____ Last 4 digits of account number _____	<b>As of the petition filing date, the claim is: Check all that apply.</b> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed <b>Basis for the claim:</b> _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$6,570.85</b>
<b>3.84</b>	<b>Nonpriority creditor's name and mailing address</b> <b>New York State Auto</b> <b>Dealers Group Insurance Trust</b> <b>P.O. Box 7347</b> <b>Albany, NY 12224</b> Date(s) debt was incurred _____ Last 4 digits of account number _____	<b>As of the petition filing date, the claim is: Check all that apply.</b> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed <b>Basis for the claim:</b> _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$0.00</b>
<b>3.85</b>	<b>Nonpriority creditor's name and mailing address</b> <b>New York State Insurance Fund</b> <b>Workers' Compensation</b> <b>P.O. Box 5238</b> <b>New York, NY 10008-5238</b> Date(s) debt was incurred _____ Last 4 digits of account number _____	<b>As of the petition filing date, the claim is: Check all that apply.</b> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed <b>Basis for the claim:</b> _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$0.00</b>
<b>3.86</b>	<b>Nonpriority creditor's name and mailing address</b> <b>New York Tire Factory</b> <b>25A Dubon CT.</b> <b>Farmingdale, NY 11735</b> Date(s) debt was incurred _____ Last 4 digits of account number _____	<b>As of the petition filing date, the claim is: Check all that apply.</b> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed <b>Basis for the claim:</b> _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$265.00</b>
<b>3.87</b>	<b>Nonpriority creditor's name and mailing address</b> <b>NY State Thruway Authority</b> <b>RR 5</b> <b>Schenectady, NY 12309</b> Date(s) debt was incurred _____ Last 4 digits of account number _____	<b>As of the petition filing date, the claim is: Check all that apply.</b> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed <b>Basis for the claim:</b> _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$0.00</b>

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<b>3.88</b>	<b>Nonpriority creditor's name and mailing address</b> NYC Economic Development Corp. PO Box 5264 New York, NY 10008-5264 Date(s) debt was incurred ____ Last 4 digits of account number <u>9051</u>	<b>As of the petition filing date, the claim is: Check all that apply.</b> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$13,545.60</b>
<hr/>			
<b>3.89</b>	<b>Nonpriority creditor's name and mailing address</b> NYC Water Board PO Box 11863 Newark, NJ 07101-8163 Date(s) debt was incurred ____ Last 4 digits of account number <u>5001</u>	<b>As of the petition filing date, the claim is: Check all that apply.</b> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$500.00</b>
<hr/>			
<b>3.90</b>	<b>Nonpriority creditor's name and mailing address</b> NYC Water Board PO Box 11863 Newark, NJ 07101-8163 Date(s) debt was incurred ____ Last 4 digits of account number <u>9001</u>	<b>As of the petition filing date, the claim is: Check all that apply.</b> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$116.76</b>
<hr/>			
<b>3.91</b>	<b>Nonpriority creditor's name and mailing address</b> NYCEDC PO Box 5264 New York, NY 10008-5264 Date(s) debt was incurred ____ Last 4 digits of account number ____	<b>As of the petition filing date, the claim is: Check all that apply.</b> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$57,905.48</b>
<hr/>			
<b>3.92</b>	<b>Nonpriority creditor's name and mailing address</b> NYS Dept. of Motor Vehicles 6 Empire States Plaza Albany, NY 12228 Date(s) debt was incurred ____ Last 4 digits of account number ____	<b>As of the petition filing date, the claim is: Check all that apply.</b> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$0.00</b>
<hr/>			
<b>3.93</b>	<b>Nonpriority creditor's name and mailing address</b> NYS Dept. of Transportation Main Office 50 Wolf Road Albany, NY 12232 Date(s) debt was incurred ____ Last 4 digits of account number ____	<b>As of the petition filing date, the claim is: Check all that apply.</b> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$0.00</b>
<hr/>			
<b>3.94</b>	<b>Nonpriority creditor's name and mailing address</b> NYS Department of Labor P.O. Box 15130 Albany, NY 12212-5130 Date(s) debt was incurred ____ Last 4 digits of account number ____	<b>As of the petition filing date, the claim is: Check all that apply.</b> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$0.00</b>

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Case number (if known) \_\_\_\_\_

3.95	Nonpriority creditor's name and mailing address <b>NYS Insurance Fund Workers' Compensation PO Box 5238 New York, NY 10008-5238</b> Date(s) debt was incurred _____ Last 4 digits of account number <u>2633</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
<hr/>			
3.96	Nonpriority creditor's name and mailing address <b>One Service Source Inc. PO Box 40 Carle Place, NY 11514</b> Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$22,569.78
<hr/>			
3.97	Nonpriority creditor's name and mailing address <b>Paul &amp; Daniels Flags &amp; Banners 2A Magnolia Avenue Nesconset, NY 11767</b> Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,524.25
<hr/>			
3.98	Nonpriority creditor's name and mailing address <b>Paul MacHenry and Company 20 Executive Drive Moorestown, NJ 08057-4252</b> Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
<hr/>			
3.99	Nonpriority creditor's name and mailing address <b>Paul Revere Life Ins. Co. PO Box 1365 Columbia, SC 29202-1365</b> Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$27,499.72
<hr/>			
3.100	Nonpriority creditor's name and mailing address <b>PH Media Group Oakland House Talbot Road, 12th Floor Manchester M16 0PQ</b> Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,500.00
<hr/>			
3.101	Nonpriority creditor's name and mailing address <b>Pitney Bowes Global Financial PO Box 371887 Pittsburgh, PA 15250</b> Date(s) debt was incurred _____ Last 4 digits of account number <u>2547</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$344.39

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3.102	Nonpriority creditor's name and mailing address <b>Pitta Bishop Del Gioro &amp; Gibr</b> <b>120 Broadway</b> <b>28th Floor</b> <b>New York, NY 10271</b> Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$74,187.05</b>
3.103	Nonpriority creditor's name and mailing address <b>PJK Sales, Inc.</b> <b>DM Professional, Inc.</b> <b>PO Box 508</b> <b>Lyndhurst, NJ 07071</b> Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$20.00</b>
3.104	Nonpriority creditor's name and mailing address <b>Precision Collison Auto Body</b> <b>123-17 101st Street</b> <b>South Richmond Hill, NY 11419</b> Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$9,150.00</b>
3.105	Nonpriority creditor's name and mailing address <b>Prestige Auto Transport</b> <b>374 Brehaut Avenue</b> <b>Staten Island, NY 10307</b> Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$0.00</b>
3.106	Nonpriority creditor's name and mailing address <b>Reed Smith LLP</b> <b>599 Lexington Avenue</b> <b>26th Floor</b> <b>New York, NY 10022-7684</b> Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$262.50</b>
3.107	Nonpriority creditor's name and mailing address <b>Reyna Capital Corporatoin</b> <b>PO Box 674275</b> <b>Dallas, TX 75267-4275</b> Date(s) debt was incurred ____ Last 4 digits of account number <u>2383</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$0.00</b>
3.108	Nonpriority creditor's name and mailing address <b>Reynolds &amp; Reynolds</b> <b>PO Box 182206</b> <b>Columbus, OH 43218</b> Date(s) debt was incurred ____ Last 4 digits of account number <u>5776</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$0.00</b>

Debtor <b>Bay Ridge Automotive Company, LLC</b>		Case number (if known) _____	
Name _____			

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3.109	<b>Nonpriority creditor's name and mailing address</b> <b>RouteOne, LLC</b> <b>16902 Collections Center Drive</b> <b>Chicago, IL 60693</b>  Date(s) debt was incurred _____ Last 4 digits of account number _____	<b>As of the petition filing date, the claim is: Check all that apply.</b> <span style="float: right;"><b>\$561.76</b></span> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b> _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.110	<b>Nonpriority creditor's name and mailing address</b> <b>Sand Automotive Warehouse</b> <b>59 15th Street</b> <b>Brooklyn, NY 11215</b>  Date(s) debt was incurred _____ Last 4 digits of account number _____	<b>As of the petition filing date, the claim is: Check all that apply.</b> <span style="float: right;"><b>\$130.02</b></span> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b> _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.111	<b>Nonpriority creditor's name and mailing address</b> <b>Secure Auto Systems, Inc.</b> <b>PO Box 060878</b> <b>Staten Island, NY 10306-0009</b>  Date(s) debt was incurred _____ Last 4 digits of account number _____	<b>As of the petition filing date, the claim is: Check all that apply.</b> <span style="float: right;"><b>\$399.00</b></span> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b> _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.112	<b>Nonpriority creditor's name and mailing address</b> <b>Star Paper LLC</b> <b>174 Fifth Avenue</b> <b>New York, NY 10010</b>  Date(s) debt was incurred _____ Last 4 digits of account number _____	<b>As of the petition filing date, the claim is: Check all that apply.</b> <span style="float: right;"><b>\$11,799.34</b></span> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b> _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.113	<b>Nonpriority creditor's name and mailing address</b> <b>Taxicab Partitions Inc.</b> <b>14-15 Inwood Avenue</b> <b>Bronx, NY 10452</b>  Date(s) debt was incurred _____ Last 4 digits of account number _____	<b>As of the petition filing date, the claim is: Check all that apply.</b> <span style="float: right;"><b>\$300.00</b></span> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b> _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.114	<b>Nonpriority creditor's name and mailing address</b> <b>TD Bank</b> <b>32 Chestnut Street</b> <b>Lewiston, ME 04240</b>  Date(s) debt was incurred _____ Last 4 digits of account number _____	<b>As of the petition filing date, the claim is: Check all that apply.</b> <span style="float: right;"><b>\$42,084.68</b></span> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b> _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.115	<b>Nonpriority creditor's name and mailing address</b> <b>TD Bank NA</b> <b>1100 Lake Street</b> <b>Ramsey, NJ 07446</b>  Date(s) debt was incurred _____ Last 4 digits of account number _____	<b>As of the petition filing date, the claim is: Check all that apply.</b> <span style="float: right;"><b>\$0.00</b></span> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b> _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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Debtor **Bay Ridge Automotive Company, LLC**  
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Case number (if known)

3.116	<b>Nonpriority creditor's name and mailing address</b> <b>TFPI/Total Fire Protection</b> <b>5322 Avenue N.</b> <b>Brooklyn, NY 11234</b>  Date(s) debt was incurred ____ Last 4 digits of account number ____	<b>As of the petition filing date, the claim is: Check all that apply.</b> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b> ____  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$629.08</b>
<hr/>			
3.117	<b>Nonpriority creditor's name and mailing address</b> <b>The Coughlan Group Inc.</b> <b>237 West 35th Street, Suite 30</b> <b>New York, NY 10001</b>  Date(s) debt was incurred ____ Last 4 digits of account number ____	<b>As of the petition filing date, the claim is: Check all that apply.</b> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b> ____  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$0.00</b>
<hr/>			
3.118	<b>Nonpriority creditor's name and mailing address</b> <b>Time Warner Cable</b> <b>PO Box 11820</b> <b>Newark, NJ 07101-8120</b>  Date(s) debt was incurred ____ Last 4 digits of account number <u>0910</u>	<b>As of the petition filing date, the claim is: Check all that apply.</b> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b> ____  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$5,584.38</b>
<hr/>			
3.119	<b>Nonpriority creditor's name and mailing address</b> <b>Time Warner Cable</b> <b>PO Box 11820</b> <b>Newark, NJ 07101-8120</b>  Date(s) debt was incurred ____ Last 4 digits of account number <u>4035</u>	<b>As of the petition filing date, the claim is: Check all that apply.</b> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b> ____  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$4,256.33</b>
<hr/>			
3.120	<b>Nonpriority creditor's name and mailing address</b> <b>Time Warner Cable</b> <b>PO Box 11820</b> <b>Newark, NJ 07101-8120</b>  Date(s) debt was incurred ____ Last 4 digits of account number <u>3710</u>	<b>As of the petition filing date, the claim is: Check all that apply.</b> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b> ____  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$241.04</b>
<hr/>			
3.121	<b>Nonpriority creditor's name and mailing address</b> <b>Time Warner Cable of NYC</b> <b>PO Box 11820</b> <b>Newark, NJ 07101-8120</b>  Date(s) debt was incurred ____ Last 4 digits of account number <u>9266</u>	<b>As of the petition filing date, the claim is: Check all that apply.</b> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b> ____  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$3,902.16</b>
<hr/>			
3.122	<b>Nonpriority creditor's name and mailing address</b> <b>TM &amp; T Service Station, Inc.</b> <b>41-15 Northern Blvd.</b> <b>Long Island City, NY 11101</b>  Date(s) debt was incurred ____ Last 4 digits of account number ____	<b>As of the petition filing date, the claim is: Check all that apply.</b> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b> ____  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$269.00</b>

Debtor **Bay Ridge Automotive Company, LLC**

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Case number (if known)

3.123	Nonpriority creditor's name and mailing address <b>TNS Auto Collision</b> <b>1011 61st Street</b> <b>Brooklyn, NY 11219-5127</b> Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$7,936.24</b>
3.124	Nonpriority creditor's name and mailing address <b>TNS Auto Collision</b> <b>1011 61st Street</b> <b>Brooklyn, NY 11219-5127</b> Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$4,782.98</b>
3.125	Nonpriority creditor's name and mailing address <b>Tri-County Auto Company</b> <b>311 West Main Street</b> <b>Rockaway, NJ 07866</b> Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$112.55</b>
3.126	Nonpriority creditor's name and mailing address <b>True Car, Inc.</b> <b>Dept. LA 24198</b> <b>Pasadena, CA 91185-4198</b> Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$7,161.86</b>
3.127	Nonpriority creditor's name and mailing address <b>U.S. Dept. of Transportation</b> <b>1200 New Jersey Avenue, SE</b> <b>Washington, DC 20590</b> Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$0.00</b>
3.128	Nonpriority creditor's name and mailing address <b>UAW Local 259</b> <b>140 Sylvan Avenue</b> <b>Suite 303</b> <b>Englewood Cliffs, NJ 07632</b> Date(s) debt was incurred ____ Last 4 digits of account number <u>0291</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$50,652.92</b>
3.129	Nonpriority creditor's name and mailing address <b>United Automobile Workers</b> <b>80 Jerusalem Avenue</b> <b>Hicksville, NY 11801</b> Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$1,582.75</b>

Debtor **Bay Ridge Automotive Company, LLC**

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3.130	<p>Nonpriority creditor's name and mailing address</p> <p><b>United Healthcare</b>  <b>1 Penn Plaza</b>  <b>8th Floor</b>  <b>New York, NY 10119</b></p> <p>Date(s) debt was incurred _____</p> <p>Last 4 digits of account number _____</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent  <input type="checkbox"/> Unliquidated  <input checked="" type="checkbox"/> Disputed</p> <p>Basis for the claim: _____</p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<p><b>\$5,585.68</b></p>
3.131	<p>Nonpriority creditor's name and mailing address</p> <p><b>United Radio, Inc.</b>  <b>5705 Enterprise Pkwy</b>  <b>East Syracuse, NY 13057</b></p> <p>Date(s) debt was incurred _____</p> <p>Last 4 digits of account number _____</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent  <input type="checkbox"/> Unliquidated  <input checked="" type="checkbox"/> Disputed</p> <p>Basis for the claim: _____</p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<p><b>\$2,407.50</b></p>
3.132	<p>Nonpriority creditor's name and mailing address</p> <p><b>Universal Underwriters Group</b>  <b>4440 Paysphere Circle</b>  <b>Chicago, IL 60674</b></p> <p>Date(s) debt was incurred _____</p> <p>Last 4 digits of account number _____</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent  <input type="checkbox"/> Unliquidated  <input checked="" type="checkbox"/> Disputed</p> <p>Basis for the claim: _____</p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<p><b>\$0.00</b></p>
3.133	<p>Nonpriority creditor's name and mailing address</p> <p><b>Uperator LLC</b>  <b>17505 N. 79th Avenue</b>  <b>Suite 413</b>  <b>Glendale, AZ 85308</b></p> <p>Date(s) debt was incurred _____</p> <p>Last 4 digits of account number _____</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent  <input type="checkbox"/> Unliquidated  <input checked="" type="checkbox"/> Disputed</p> <p>Basis for the claim: _____</p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<p><b>\$3,520.00</b></p>
3.134	<p>Nonpriority creditor's name and mailing address</p> <p><b>UPS Ground Freight</b>  <b>PO Box 7247-0244</b>  <b>Philadelphia, PA 19170</b></p> <p>Date(s) debt was incurred _____</p> <p>Last 4 digits of account number <u>A155</u></p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent  <input type="checkbox"/> Unliquidated  <input checked="" type="checkbox"/> Disputed</p> <p>Basis for the claim: _____</p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<p><b>\$576.89</b></p>
3.135	<p>Nonpriority creditor's name and mailing address</p> <p><b>Venus Auto Parts</b>  <b>2125 Greenpoint Avenue</b>  <b>Brooklyn, NY 11245</b></p> <p>Date(s) debt was incurred _____</p> <p>Last 4 digits of account number _____</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent  <input type="checkbox"/> Unliquidated  <input checked="" type="checkbox"/> Disputed</p> <p>Basis for the claim: _____</p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<p><b>\$95.00</b></p>
3.136	<p>Nonpriority creditor's name and mailing address</p> <p><b>Verizon</b>  <b>PO Box 408</b>  <b>Newark, NJ 07101-0080</b></p> <p>Date(s) debt was incurred _____</p> <p>Last 4 digits of account number <u>0002</u></p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent  <input type="checkbox"/> Unliquidated  <input checked="" type="checkbox"/> Disputed</p> <p>Basis for the claim: _____</p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<p><b>\$474.72</b></p>



Debtor **Bay Ridge Automotive Company, LLC**

Name

Case number (if known)

3.137	Nonpriority creditor's name and mailing address <b>Verizon</b> <b>PO Box 15043</b> <b>Albany, NY 12212-5043</b> Date(s) debt was incurred ____ Last 4 digits of account number <u>6166</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$0.00</u>
3.138	Nonpriority creditor's name and mailing address <b>Verizon</b> <b>PO Box 15124</b> <b>Albany, NY 12212</b> Date(s) debt was incurred ____ Last 4 digits of account number <u>2299</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$168.70</u>
3.139	Nonpriority creditor's name and mailing address <b>Vintage Parts</b> <b>PO Box 376</b> <b>Beaver Dam, WI 53916</b> Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$303.13</u>
3.140	Nonpriority creditor's name and mailing address <b>Wheel Fix It</b> <b>55 St. Mary's Place</b> <b>Freeport, NY 11520</b> Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$100.00</u>
3.141	Nonpriority creditor's name and mailing address <b>White Plains Nissan</b> <b>500 Tarrytown Road</b> <b>White Plains, NY 10607</b> Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$26.41</u>
3.142	Nonpriority creditor's name and mailing address <b>Wholesale Auto Supply Co.</b> <b>22 Florence Street</b> <b>PO Box 2166</b> <b>South Hackensack, NJ 07606-1591</b> Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$0.00</u>
3.143	Nonpriority creditor's name and mailing address <b>Wiss &amp; Company LLP</b> <b>14 Penn Plaza</b> <b>Suite 300</b> <b>New York, NY 10122</b> Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$3,192.50</u>

Debtor **Bay Ridge Automotive Company, LLC**  
Name

Case number (if known)

3.144 Nonpriority creditor's name and mailing address  
**Withum Smith & Brown**  
**5 Vaughn Drive**  
**Princeton, NJ 08540**  
Date(s) debt was incurred \_\_\_\_  
Last 4 digits of account number **8938**

As of the petition filing date, the claim is: Check all that apply.

**\$0.00**

- ☐ Contingent  
☐ Unliquidated  
☐ Disputed

Basis for the claim: \_\_\_\_

Is the claim subject to offset? ☒ No ☐ Yes

3.145 Nonpriority creditor's name and mailing address  
**Workers' Compensation Board**  
**328 State Street**  
**Schenectady, NY 12305**  
Date(s) debt was incurred \_\_\_\_  
Last 4 digits of account number \_\_\_\_

As of the petition filing date, the claim is: Check all that apply.

**\$0.00**

- ☒ Contingent  
☒ Unliquidated  
☒ Disputed

Basis for the claim: \_\_\_\_

Is the claim subject to offset? ☒ No ☐ Yes

3.146 Nonpriority creditor's name and mailing address  
**Zide Inc.**  
**11 Eliot Avenue**  
**Huntington Station, NY 11746**  
Date(s) debt was incurred \_\_\_\_  
Last 4 digits of account number \_\_\_\_

As of the petition filing date, the claim is: Check all that apply.

**\$1,589.48**

- ☐ Contingent  
☐ Unliquidated  
☒ Disputed

Basis for the claim: \_\_\_\_

Is the claim subject to offset? ☒ No ☐ Yes

**Part 3: List Others to Be Notified About Unsecured Claims**

4. List in alphabetical order any others who must be notified for claims listed in Parts 1 and 2. Examples of entities that may be listed are collection agencies, assignees of claims listed above, and attorneys for unsecured creditors.

If no others need to be notified for the debts listed in Parts 1 and 2, do not fill out or submit this page. If additional pages are needed, copy the next page.

Name and mailing address

On which line in Part 1 or Part 2 is the related creditor (if any) listed?

Last 4 digits of account number, if any

**Part 4: Total Amounts of the Priority and Nonpriority Unsecured Claims**

5. Add the amounts of priority and nonpriority unsecured claims.

5a. Total claims from Part 1  
5b. Total claims from Part 2

5c. Total of Parts 1 and 2  
Lines 5a + 5b = 5c.

Total of claim amounts	
5a.	\$ 1,003,503.00
5b. +	\$ 1,047,674.98

5c.	\$ 2,051,177.98
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Fill in this information to identify the case:

Debtor name Bay Ridge Automotive Company, LLC

United States Bankruptcy Court for the: SOUTHERN DISTRICT OF NEW YORK

Case number (if known) \_\_\_\_\_

☐ Check if this is an amended filing

Official Form 206G

**Schedule G: Executory Contracts and Unexpired Leases**

12/15

Be as complete and accurate as possible. If more space is needed, copy and attach the additional page, number the entries consecutively.

1. Does the debtor have any executory contracts or unexpired leases?

☐ No. Check this box and file this form with the debtor's other schedules. There is nothing else to report on this form.

☒ Yes. Fill in all of the information below even if the contacts of leases are listed on *Schedule A/B: Assets - Real and Personal* (Official Form 206A/B). *Property*

2. List all contracts and unexpired leases

State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease

2.1. State what the contract or lease is for and the nature of the debtor's interest **Lease for Showroom**

State the term remaining **20 years**

List the contract number of any government contract \_\_\_\_\_

**612 86th Street, LLC  
c/o Seltzer Sussman Haberman  
100 Jericho Quadrangle  
Jericho, NY 11753**

2.2. State what the contract or lease is for and the nature of the debtor's interest **Lease for Pre-Owned Center**

State the term remaining **20 years**

List the contract number of any government contract \_\_\_\_\_

**Dige Associates LLC  
c/o Peter J. Zahakis  
2707 Landing Avenue  
Bellmore, NY 11710**

2.3. State what the contract or lease is for and the nature of the debtor's interest **Ford Sales and Service Agreement**

State the term remaining \_\_\_\_\_

List the contract number of any government contract \_\_\_\_\_

**Ford Motor Company  
16800 Executive Plaza  
Dearborn, MI 48126**

2.4. State what the contract or lease is for and the nature of the debtor's interest **Lease for Service Center**

State the term remaining **37 years**

List the contract number of any government contract \_\_\_\_\_

**NYC Economic Development Corp.  
Attn: Lease Administrator  
110 William Street  
New York, NY 10038**

Debtor 1 **Bay Ridge Automotive Company, LLC**  
First Name Middle Name Last Name

Case number (if known) \_\_\_\_\_

**Additional Page if You Have More Contracts or Leases**

**2. List all contracts and unexpired leases**

State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease

2.5. State what the contract or lease is for and the nature of the debtor's interest **Data Management Services**

State the term remaining

List the contract number of any government contract

**Reynolds and Reynolds  
One Reynolds Way  
Dayton, OH 45430**

2.6. State what the contract or lease is for and the nature of the debtor's interest **Real Property Lease**

State the term remaining **6 years**

List the contract number of any government contract

**Riverside Machinery Co.  
140 53rd Street  
Brooklyn, NY 11232**

Fill in this information to identify the case:

Debtor name Bay Ridge Automotive Company, LLC

United States Bankruptcy Court for the: SOUTHERN DISTRICT OF NEW YORK

Case number (if known) \_\_\_\_\_

☐ Check if this is an amended filing

Official Form 206H  
Schedule H: Your Codebtors

12/15

Be as complete and accurate as possible. If more space is needed, copy the Additional Page, numbering the entries consecutively. Attach the Additional Page to this page.

1. Do you have any codebtors?

- ☐ No. Check this box and submit this form to the court with the debtor's other schedules. Nothing else needs to be reported on this form.  
☒ Yes

2. In Column 1, list as codebtors all of the people or entities who are also liable for any debts listed by the debtor in the schedules of creditors, Schedules D-G. Include all guarantors and co-obligors. In Column 2, identify the creditor to whom the debt is owed and each schedule on which the creditor is listed. If the codebtor is liable on a debt to more than one creditor, list each creditor separately in Column 2.

Column 1: Codebtor

Column 2: Creditor

Name	Mailing Address	Name	Check all schedules that apply:
2.1 Alex Boyko	3201 NE 183rd Street #2004 North Miami Beach, FL 33160	JP Morgan Chase Bank, NA	<input checked="" type="checkbox"/> D <u>2.1</u> <input type="checkbox"/> E/F _____ <input type="checkbox"/> G _____
2.2 Alex Boyko	3201 NE 183rd Street #2004 North Miami Beach, FL 33160	TD Bank	<input checked="" type="checkbox"/> D <u>2.2</u> <input type="checkbox"/> E/F _____ <input type="checkbox"/> G _____
2.3 BICOM NY, LLC	787 11th Avenue New York, NY 10019	JP Morgan Chase Bank, NA	<input checked="" type="checkbox"/> D <u>2.1</u> <input type="checkbox"/> E/F _____ <input type="checkbox"/> G _____
2.4 Gary Flom	50 Riverside Blvd. #10A New York, NY 10169	JP Morgan Chase Bank, NA	<input checked="" type="checkbox"/> D <u>2.1</u> <input type="checkbox"/> E/F _____ <input type="checkbox"/> G _____
2.5 Gary Flom	50 Riverside Blvd. #10A New York, NY 10169	TD Bank	<input checked="" type="checkbox"/> D <u>2.2</u> <input type="checkbox"/> E/F _____ <input type="checkbox"/> G _____

Debtor **Bay Ridge Automotive Company, LLC**

Case number (if known) \_\_\_\_\_

**Additional Page to List More Codebtors**

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page.  
Column 1: Codebtor Column 2: Creditor

2.6	ISCOM NY, LLC	1 York Street New York, NY 10013	JP Morgan Chase Bank, NA	<input checked="" type="checkbox"/> D <u>2.1</u> <input type="checkbox"/> E/F _____ <input type="checkbox"/> G _____
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2.7	Venamin Nilva	3201 NE 183rd Street #2004 North Miami Beach, FL 33160	JP Morgan Chase Bank, NA	<input checked="" type="checkbox"/> D <u>2.1</u> <input type="checkbox"/> E/F _____ <input type="checkbox"/> G _____
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2.8	Venamin Nilva	3201 NE 183rd Street #2004 North Miami Beach, FL 33160	TD Bank	<input checked="" type="checkbox"/> D <u>2.2</u> <input type="checkbox"/> E/F _____ <input type="checkbox"/> G _____
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